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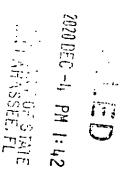
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COVER LETTER

TO:	Registration	Section		
Division	of Corpora	tions		
SUBJE	WEISTO	WEISTOCK, JONES, DAVIS CONGLOMERATE L.P.		
		(Name of Florida Limited Part	tnership or Limited Liability	Limited Partnership)
Please re		icate of Dissolution a respondence concerni LL.M.	, ,	tted for filing.
	_	(Contac	rt Person)	
Grady H.	Williams, Jr.,	LL.M., Attorneys at Law	, P.A.	
		(Firm/C	Company)	
1543 Kin	gsley Ave., Bl	dg. 5		
		(Addi	ress)	
Orange P	ark, FL 32073			
		(City, State ar	nd Zip Code)	
For furt	her informa	tion concerning this n	natter, please call:	
Grady H.	Williams, Jr.,	LL.M.	904 at (264-8800
	(Name	of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclose	d is a check	for the following ame	ount:	
\$52.50) Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing F and Certified Co	
STREE	T ADDRE	SS:	MAILING ADDRESS:	
Registration Section		~	Registration Section	
	rision of Corporations The Building Division of Corporations P. O. Box 6327		•	
	cecutive Cer	nter Circle	Tallahassee, FL 32314	

Tallahassee, FL 32301

CERTIFICATE OF DISSOLUTION FOR

WEISTOCK, JONES, DAVIS CONGLOMERATE L.P.

(Name of Florida Limited Partnership or				
partnership or limited liability limite Florida Department of State on Apri	n 620.1203, Florida Statutes, this Florida limited ed partnership, whose certificate was filed with the 126, 2006, assigned Florida, hereby submits this Certificate of			
FIRST: Reason for dissolution: (S	State why partnership is submitting dissolution)			
The partnership has completed its business purpose, and all of the partnership's general partners and				
limited partners have consented to the diss	olution of the partnership,			
SECOND: A Notice of Dissol (Check box if a	·			
(Check box 11 a	macricu.)			
Department of State.)	than 90 days after the date this document is filed by the Florida one of the specific that the specif			
Signatures of each general partner or the polynomial Subjection	erson appointed pursuant to s. 620.1803(3) or (4), F.S.:			
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75			

NOTICE OF DISSOLUTION FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

This notice is submitted by the dissolved limited partnership or limited liability limited partnership named below or the successor entity for resolution of payment of unknown claims against this limited partnership or limited liability limited partnership as provided in s. 620.1807, F.S.

This "Notice of Dissolution" is optional and is not required when filing a Certificate of Dissolution.

Name of Dissolved Limited Partnership or Limited Liability Limited Partnership: WEISTOCK, JONES, DAVIS CONGLOMERATE L.P. Description of information that must be included in a claim: Basis for the claim; SSN/EIN of claimant; name and address of claimant; amount due on claim when due; due date of claim; whether claim is or is not contingent or unliquidated; if claim is contingent or unliquidated, the nature of the uncertainty; whether claim is secured and if so, the security therefor. Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.) ELAINE T. WEISTOCK 1691 MISTY LAKE DRIVE FLEMING ISLAND, FL 32003 A claim against the above named limited partnership or limited liability limited partnership

will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of the notice.

Signature of a general partner or a principal of the successor entity:

Elma Illustock ELAINE T. WEISTOCK Printed Name

Fee: No charge if included with Certificate of Dissolution. If filed separately, \$52.50.