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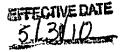
(Re	equestor's Name)	
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	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

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TO: Registration	Section Corporations		
SUBJECT: The	<u>Genesis Fund, LF</u>	o ip or Limited Liability Lim	ited Partnership)
The enclosed Certif	ficate of Dissolution ar	nd fee(s) are submitted	for filing.
Please return all con	rrespondence concerni	ng this matter to:	
Charles R. Maxwell II	, Esq.		
	(Contact Person)	, ₁₀ <u>0</u> 11 10 10 10 10 10 10 10 10 10 10 10 10	
Charles Ray Maxwell	III. P.A.		
	(Firm/Company)		
3975 S. Orange Blos	som Trail Suite 101		
	(Address)	· · ·	
Orlando, FL 32839			
	(City, State and Zip Code)		
For further informa	tion concerning this m	atter, please call:	
Charles R. Maxwell II	, Esq.	at (407) 24	0-2666
(Name of Con	tact Person)	(Area Code and I	Daytime Telephone Number)
Enclosed is a check	for the following amo	unt:	
☑ \$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy	☐ \$113.75 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRES	SS:	MAILING	ADDRESS:
Registration Section	n	Registration	
Division of Corpora	ations	Division of	Corporations
Clifton Building		P. O. Box 6	- - ·
2661 Executive Cer	· ·	Tallahassee,	FL 32314
Tallahassee, FL 32	301		

CERTIFICATE OF DISSOLUTION FOR

FILED 10 MAY -7 PM 1:50

The Genesis Fund, LP (Name of Florida Limited Partnership or Limited Liability Limited Partnership) SECRETARY OF STATE (Name of Florida Limited Partnership or Limited Liability Limited Partnership)	+
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)	
Pursuant to the provisions of section 620.1203, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on September 5, 2006, assigned Florida document number A06000001068, hereby submits this Certificate of Dissolution.	
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)	
Consent of all general partners and of all limited partners.	
SECOND: A Notice of Dissolution is attached. (Check box if attached.)	
THIRD: Effective date, if other than the date of filing: 5/31/2010.	
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)	
Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:	
-D2 (. 12-	
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50	
Certificate of Status (optional): \$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: The Genesis Fund, LP Description of information that must be included in a claim: Name of claimant. Detailed description of claim, including the product or service, amount of claim, and relevant date(s). Copies of any related documentation as proof of claim, including invoices, purchase orders and other. Contact information for claimant including, contact name, address, telephone, facsimile, and email. Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.) Charles R. Maxwell II, P.A. 3975 S. Orange Blossom Trail, Suite 101 Orlando, FL 32839 RE: THE GENESIS FUND, LP

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:

David Faber, as Manager of Faber Asset Management, LLC

Printed Name

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