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MORRISSEY, HAWKINS & LYNCH

ONE INTERNATIONAL PLACE

BOSTON, MASSACHUSETTS 02110-2600

TELEPHONE 617-345-4500 FACSIMILE 617-345-0286

September 26, 2018

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: The Cleary Family LLLP

Dear Sir or Madam:

I enclose a check for \$52.50 for the filing of the enclosed Certificate of Dissolution for the above LLLP. Please contact us with any questions.

Sincerely,

Pamela A. Doherty

Paralegal

Enclosures

cc: Colleen E. Abcunas, Esq.

COVER LETTER

TO: Registration Section		
Division of Corporations		
The Cleary Family LLLP SUBJECT:		
(Name of Florida Limite	d Partnership or Limited Liability Limited Partnership)	
The enclosed Certificate of Dissolution Please return all correspondence concrete Robert F. Morrissey, Esq.		
IC	'ontact Person)	-
Morrissey, Hawkins & Lynch		
(I	Firm/Company)	
1 International Place, Suite 3220		2010 OCT -
	(Address)	OCT -
Boston, MA 02110		- W1 - L
(Cny. S	tate and Zip Code)	
For further information concerning th	ais matter, please call:	AR II: 37
Robert F. Morrissey, Esq.	617 345-4500 at ()	
(Name of Contact Person)	(Area Code) (Daytime Telephone Nu	mber)
Enclosed is a check for the following	amount:	
S52.50 Filing Fee S61.25 Filing Fe and Certificate of Status		lopy, and
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Registration Section Division of Corporations P. O. Box 6327 Tallahassee, Fl. 32314

CERTIFICATE OF DISSOLUTION FOR

The Cleary Family LLLP			
(Name of Florida Limited Partnership or	Limited Liability	Limited Partnership)	
Pursuant to the provisions of section partnership or limited liability limited Florida Department of State on Octo document number ACCOCOCOTÓ Dissolution.	ed partnership, v	whose certificate was	filed with the
FIRST: Reason for dissolution: (S	tate why partne	rship is submitting d	issolution)
The business of the LLLP has been comple	eted, and the partn	ers have voted to dissolve	e pursuant to the
partnership agreement.			
SECOND: A Notice of Dissol (Check box if at		<u>.</u>	
THIRD: Effective date, if other than the (Effective date cannot be prior to nor more Department of State.) Note: If the date inserted in this block does not be listed as the document's effective date.	than 90 days after snot meet the appli	icable statutory filing req	
Signatures of each general partner or the pe	erson appointed put	rsuant to s. 620.1803(3) c	or (4), F.S.F. 8
1m 7. h	_		
·	_		
Filing Fee:	\$52.50		D.: 3
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75		