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COVER LETTER

SUBJECT: CLOSS LNGS AT TEQUESTA, L.P. (Name of Florida Limited Partnership or Limited Liability Limited Partnership)
The enclosed Certificate of Dissolution and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
Contact Person) (Contact Person)
PHILADER NIA WANAGEMENT CO. (Firm/Company)
1411 WALAUT ST
(Address) (Address) (Aldress) (Address) (City, State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (A) Y AY -0 Lov FXT 08 (Area Code and Daytime Telephone Number)
Enclosed is a check for the following amount:
\$52.50 Filing Fee and Certificate of Status \$105.00 Filing Fee Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

CERTIFICATE OF DISSOLUTION FOR

FILED 07 APR 13 PM 12: 00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

(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 ill 8 2006 , hereby submits this Certificate of Dissolution. **FIRST:** Reason for dissolution: (State why partnership is submitting dissolution) CONDUCTED BUSINESS **SECOND:** A Notice of Dissolution is attached. (Check box if attached.) THIRD: Effective date, if other than the date of filing: (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. 620.1807(3) or (4), F.S.: Filing Fee: \$52.50 **Certified Copy (optional):** \$52.50

\$8.75

Certificate of Status (optional):