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(Bu	isiness Entity Nam	ie)			
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Certified Copies	_ Certificates	of Status			
Special Instructions to	Filing Officer:	1			
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DEPARTMENT OF STATE 12 AUG 16 AM 10: 19

FILED 12 AUG 20 PH 3: 19 SECRETARY OF STATE MALLAHASSEE, FLORIDA

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LAZARUS CORPORATE FILING SER	VICE		
3320 SW 87 TH AVENUE			
MIAMI, FL 33165 (305) 552	2-5973		
CORPORATION NAME(S) & DOCUM	ENT NUMBER(S). (if	Office Use Only	
1. <u>Glass</u> Box Li (Corporation Name)	bor 300 (Document #)) + Fund,	LLLP
2(Corporation Name)	(Document #)		
3(Corporation Name)	(Document #)	· · · · · · · · · · · · · · · · ·	
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(Corporation Name)	(Document #)		
Walk in Pick up time Mail out Will wait	Photocopy	Certified Copy Certificate of Status	
NEW FILINGS	AMENDMENTS		·
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Annual Report Fictitious Name	 Foreign Limited Partners Reinstatement Trademark Other 	ship	· .
CR2E031(7/97)		Examiner's Initials	

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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 17, 2012

LAZARUS

SUBJECT: GLASS BOX LIBOR 300+ FUND, LLLP Ref. Number: A0700000885

We have received your document for GLASS BOX LIBOR 300+ FUND, LLLP and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Leslie Sellers Regulatory Specialist II

Letter Number: 212A00021214

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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	CERTIF	ICATE OF DI FOR	SSOLUTION		
	GLASS BOX Name of Florida Limited P	Libor	300 +	Fund	LLLP
	Pursuant to the provisions of section partnership or limited liability limit Florida Department of State on <u>control of OD00000</u> document number <u>A070000000</u> Dissolution.	n 620.1203, Flo ted partnership, 07-19-5 2885, here	whose certificate w 2007, as by submits this Cert	lorida limited as filed with the signed Florida ificate of	
	FIRST: Reason for dissolution: (S NOT ENOUGH			dissolution)	
	· · · · ·				
	SECOND: A Notice of Disso (Check box if atta		led.		
	THIRD: Effective date, if other than the	date of filing:			
	(Effective date cannot be prior to nor mor Department of State.)	e than 90 days aft	er the date this documen	t is filed by the Florid	a
	Signatures of each general partner (s. 620.1803(3) or (4), F.S.:	or the person a	pointed pursuant to		
<.	RIM G	_	ROBERT	CALLAG	¥
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	Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75		IALLA	
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				FLORIDA	
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