

A07000001299

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

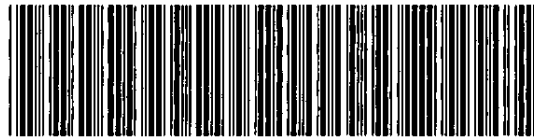
(Document Number)

Certified Copies _____ Certificates of Status _____

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10 MAY 12 PM 2:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

MAY 13 2010

EXAMINER

LAW OFFICES
Reichstein and Lapat
an association of individual attorneys

3300 University Drive
Suite 311
Coral Springs, Florida 33065
(954) 345-6442
(954) 344-0288 (Fax)

221 North La Salle Street
Suite 1137
Chicago, Illinois 60601
(312) 425-2900
(312) 425-2901(Fax)

Please Reply to Florida Office

Michael Lapat
admitted to Practice in:
Florida, Illinois & New York
mlapat@nybar.com

May 4, 2010

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

RE: <u>Certificate of Dissolution</u>	
NITHYANANDA INVESTMENT FUND I, L.P.	
Including Certified Copy	\$ 105.00
<u>Statement of Termination</u>	
NITHYANANDA INVESTMENT FUND I, L.P.	
Filing Fee	\$ 52.50
<u>Articles of Dissolution</u>	
NITHYANANDA CAPITAL MANAGEMENT, LLC	
Including Certified Copy	\$ 55.00
<u>Articles of Dissolution</u>	
NITHYA ADVISORS, LLC	
Including Certified Copy	\$ 55.00
	\$ 267.50

Dear Sir or Madam,

Please find enclosed herewith dissolution documents for the above-referenced entities. Accompanying these submissions is a **check in the sum of \$267.50** representing the filing fees.

Please file the foregoing as appropriate and return to this office file-stamped/certified copies of same as receipt thereof.

Regards,


Julie Hancock

jh
enclosure

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NITHYANANDA INVESTMENT FUND I, 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:

MICHAEL LAPAT
(Contact Person)

LAW OFFICES OF MICHAEL LAPAT
(Firm/Company)

3300 UNIVERSITY DRIVE, SUITE 311
(Address)

CORAL SPRINGS FL 33065
(City, State and Zip Code)

For further information concerning this matter, please call:

JULIE HANCOCK at (954) 345-6442
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---------------------------------------------|-----------------------------------------------------------------------------|-------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$52.50 Filing Fee | <input type="checkbox"/> \$61.25 Filing Fee
and Certificate of
Status | <input checked="" type="checkbox"/> \$105.00 Filing Fee
and Certified Copy | <input type="checkbox"/> \$113.75 Filing Fee,
Certified Copy, and
Certificate of Status |
|---------------------------------------------|-----------------------------------------------------------------------------|-------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
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**

NITHYANANDA INVESTMENT FUND I, L.P.

(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 11-26-2007, assigned Florida document number A07000001299, hereby submits this Certificate of Dissolution.

FIRST: Reason for dissolution: (State why partnership is submitting dissolution)

COMPANY CEASED OPERATION

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. 620.1803(3) or (4), F.S.:



RAJESH KRISHNAN, MANAGER OF GENERAL PARTNER,
NITHYANANDA CAPITAL MANAGEMENT, LLC

Filing Fee: \$52.50
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75