

AD80000000468

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

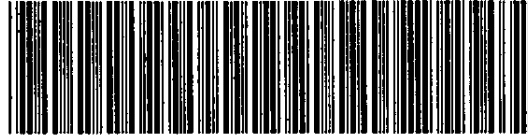
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600282441546

02/24/16--01017--015 \*\*52.50

FILED

2016 FEB 24 PM 6:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER  
FEB 25

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Coopster Investments, LLLP

(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:

Lauren A. Galvani

(Contact Person)

Baritz & Colman LLP

(Firm/Company)

1075 Broken Sound Parkway NW, Suite 102

(Address)

Boca Raton, Florida 33487

(City, State and Zip Code)

For further information concerning this matter, please call:

Lauren A. Galvani

(Name of Contact Person)

at (

561)

864-5100

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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 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**

**COOPSTER INVESTMENTS, LLLP**

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

**FILED**  
**2016 FEB 24 PM 6:12**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

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 April 24, 2008, assigned Florida document number A08000000468, hereby submits this Certificate of Dissolution.

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

The unanimous vote and consent of the general partner and all limited partners to dissolve the partnership.

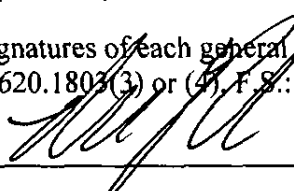
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SECOND:** ☒ A Notice of Dissolution is attached.  
(Check box if attached.)

**THIRD:** Effective date, if other than the date of filing: March 31, 2016

*(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.:

  
\_\_\_\_\_  
As Manager of Coopster Holdings, LLC,  
General Partner  
\_\_\_\_\_  
\_\_\_\_\_

<b>Filing Fee:</b>	<b>\$52.50</b>
<b>Certified Copy (optional):</b>	<b>\$52.50</b>
<b>Certificate of Status (optional):</b>	<b>\$8.75</b>

**NOTICE OF DISSOLUTION  
FOR  
FLORIDA LIMITED PARTNERSHIP  
OR LIMITED LIABILITY LIMITED PARTNERSHIP**

**FILED**  
2016 FEB 24 PM 6:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

Coopster Investments, LLLP

Description of information that must be included in a claim:

1. Name of Claimant

2. Telephone Number of Claimant

3. Address of Claimant

4. Description of Claim and 5. Proof of Claim

Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.)

Brian Markowitz

200 East Palmetto Park Road, Unit 707

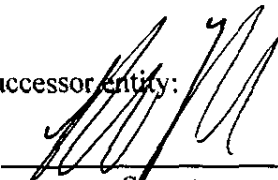
Boca Raton, Florida 33432

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:

Brian Markowitz, Manager of Coopster Holdings

Printed Name LLC, General Partner

  
Signature

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