ACTUDUOUS 30

(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



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02/24/15--01018--025 **61.25



WARTE A TONS D. CIPLLE



March 5, 2015

PETER WOOLF 1041 S.E. 17TH STREET, SUITE 300 FORT LAUDERDALE, FL 33310

SUBJECT: INTERSTATE INVESTMENT HOLDINGS LLLP

Ref. Number: A0900000830

We have received your document for INTERSTATE INVESTMENT HOLDINGS LLLP and your check(s) totaling \$61.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

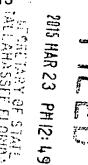
The effective date must be specific and cannot be prior to the date of filing.

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.

Deborah Bruce Regulatory Specialist II

Letter Number: 615A00004613



COVER LETTER

Division of C				
		IENT HOLD INGS LLL ip or Limited Liability Limi		-
The enclosed Certific	cate of Dissolution an	d fee(s) are submitted f	for filing.	
Please return all corr	espondence concernir	ng this matter to:		
PETER.	(Contact Person)			
INTER	(Firm/Company)	I LLC		
1041 S.E.1774	STREET, SUITE (Address)	300		
	R. FLORIDA 33 City, State and Zip Code)	2316		
For further informati	on concerning this ma	atter, please call:	Line of the control o	2015
PETER WOOD	F		9-9500 XT 306	HAR
(Name of Conta	act Person)	(Area Code and D	aytime Telephone Number)	N 2000
Enclosed is a check f	for the following amo	unt:	Alam.	<u>.</u> .
\$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	PH 75: 1.0
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle		MAILING A Registration Division of C P. O. Box 63 Tallahassee,	Section Corporations 27	

Tallahassee, FL 32301

CERTIFICATE OF DISSOLUTION FOR

INTERSTATE INVESTMENT HOLDINGS LLLP
(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 DECEMBER 2, 2009, assigned Florida document number A0900000830, hereby submits this Certificate of Dissolution.
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)
PARTUGASHIP IS BEING DISSOLVED BECAUSE ALL ASSETS
HAVE REEN DISTRIBUTED AND ALL ACTIVITY CEASED
SECOND: A Notice of Dissolution is attached. (Check box if attached.) THIRD: Effective date, if other than the date of filing: 31, 2015
(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.
:>1
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75

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

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	:		
INTERSTIFIE INVESTMENT HOLDINGS LUC			
Description of information that must be included in a claim:			
NAME & ADDRESS OF PERSON, DAFTE OF ORIGINAL CUM	my,	_	
NATURE OF CLAIM		_	
· · · · · · · · · · · · · · · · · · ·			
	2.2	2015	
Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.)	SSYHW AND	MAR 23	
1041 S.E. 17TH STREET, SUITE 300, FORT LAVOEROPHE	त्यं द्वा च	70 _4	Ċ
FLORIDA 33316	STATI	PH 12:4	1
	E» (VØ.	
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 4 years after the filing of the notice.	within	1	
Signature of a general partner or a principal of the successor entity.			
PETER WITHCH 1918		_	
Printed Name Sight up			

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