



Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1515

**DISS/TERM/CANCEL/REV OF LP/LLP
WILLIAMS ISLAND ASSOCIATES, LTD.**

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D. BRUCE

NOV 15 2010

EXAMINER

CERTIFICATE OF DISSOLUTION FOR

William Island Associates, Ltd.

(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 01/23/1981, assigned Florida document number A09967, hereby submits this Certificate of Dissolution.

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

Liquidation and Winding up of Partnership

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

THIRD: Effective date. (Effective date the date of filing.)

(Effective date cannot be prior to and 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. 620.1203(3) or (4), F.S.:

WIA, Inc.
By: James M. Lieb
James M. Lieb, Executive
Vice President

WIB, Inc.
By: James M. Lieb
James M. Lieb, Executive
Vice President

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