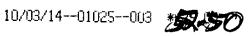
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## **COVER LETTER**

**TO:** Registration Section **Division of Corporations** 

SUBJECT: Alpert & Smith Family Limited Liability Limited Partnership
(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:

			22/1901
Richard M. Klitenick, Esq.			(D)
	(Contact Person)		
Richard M. Klitenick	P.A.		
	(Firm/Company)		
1009 Simonton Street	et		42,2 de 1 America
	(Address)		
Key West, FL 33040			,
(City, State and Zip Code)		)	
Richard M. Klitenick (Name of Contact Person)		at (	2-4101 Daytime Telephone Number)
•	for the following amo	•	zayume reteptione (vumber)
S52.50 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 ADDRE	SS:	MAILING	ADDRESS:
Registration Section		Registration Section	
Division of Corporations		Division of Corporations	
Clifton Building		P. O. Box 6327	
2661 Executive Center Circle		Tallahassee,	FL 32314
Tallahassee, FL 32	301	,	



September 29, 2014

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

RE: Alpert & Smith Family Limited Liability Limited Partnership Certificate of Dissolution

To Whom It May Concern:

Enclosed herein please find the original Certificate of Dissolution for ALPERT & SMITH FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP, along with a check in the amount of FIFTY-TWO & 50/100<sup>ths</sup> DOLLARS (\$52.50) to cover filing fees.

Sincerely,

Martyna Protopsaltis, Assistant to

Richard M. Klitenick

/mp

Enclosure as stated

c: client (w/encs.)

## CERTIFICATE OF DISSOLUTION FOR

Alpert & Smith Family Limited Liability Limited Partnership				
(Name of Florida Limited Pa	urtnership or Limited Liability Limited Partnership)			
partnership or limited liability limite Florida Department of State on document number A13000000139 Dissolution.	a 620.1203, Florida Statutes, this Florida limited ed partnership, whose certificate was filed with the 3 18 2013 assigned Florida , hereby submits this Certificate of			
FIRST: Reason for dissolution: (Se	tate why partnership is submitting dissolution)			
PURSUANT TO THE VOTE/CONSENT	OF ALL PARTNERS PURSUANT TO \$620.1801(1)(B)			
	#			
*****				
SECOND: A Notice of Dissol (Check box if attac				
THIRD: Effective date, if other than the da	ate of filing: SEPTEMBER 19, 2014			
(Effective date cannot be prior to nor more to Department of State.)	than 90 days after the date this document is filed by the Florida			
Signatures of each general partner or	r the person appointed pursuant to			
s. 620, 1803(3) or (4), F.S.:	Everett Smith			
LELLIE ALPER, GEN PARIME	EVERETT SHITTE, GEN PARMER			
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75			