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COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJECT: A & A Family Investments L.P.				
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)				
DOCUMENT NUMBER: A1300000179				
The enclosed Statement of Dissociation and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to:				
Gunwant S Dhaliwal				
(Contact Person)				
GSD Management Services LLC				
(Firm/Company)				
6329 State Road 54				
(Address)				
New Port Richey, FL 34653				
(City, State and Zip Code)				
For further information concerning this matter, please call;				
Gunv	vant S Dhaliwal	_at (_727	, 844-5555	
	(Name of Contact Person)		and Daytime Telephone Number)	
V	\$52.50 Filing Fee	\$105.00 Filing	Fee and Certified Copy.	
STREET ADDRESS: MAILING ADDRESS:				
Regist	ration Section	Registration Section		
	on of Corporations	Division of Corporations		
	n Building	P. O. Box 6327		
	2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301			
CR2E1	18 (01/06)			

STATEMENT OF DISSOCIATION **FOR** GENERAL PARTNER **OF**

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

Pursuant to the provisions of section 620.1605, Florida Statutes, the undersigned general partner hereby dissociates from the following limited partnership or limited liability limited partnership:

1. The name of Limited Partnership or Limited Liability Limited Partnership is:

A & A Family Investments L.P.

2. The name of the dissociating general partner is:

GSD Management Services LLC

Signature of Dissociating General Partner

Filing Fee:

\$52.50

Certified Copy (optional): \$52.50