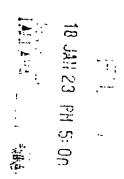
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Office Use Only



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COVER LETTER

TO: Regi	istration	Section			
Division of	Corporat	ions			
SUBJECT:	INTEREAL LAKE PLACID I RESIDENCE LLLP				
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)					
The enclose Please retur Mare Tetzner	ed Certifi n all corr	cate of Dissolution a espondence concern	nd fee(s) are subming this matter to:	itted for filing.	
		(Contac	et Person)		
Intereal Florid	da Investm	ent LLC			
		(Firm/C	lompany)		
2340 NE 48th	i Court				
		(Addi	ress)		
Lighthouse Po	oint, FL 33	064			
		(City, State a	nd Zip Code)	<u>-</u>	
For further i	informati	on concerning this n	natter, please call:		
Marc Tetzner			954 at (6631100	
	(Name o	Contact Person)	(Area Code)	(Daytime Telephone Number)	
Enclosed is	a check	for the following amo	ount:		
\$52.50 Fili	ng Fee	S61.25 Filing Fee and Certificate of Status	\$105.00 Filing F and Certified Co		
STREET ADDRESS:			ING ADDRESS:		
Registration Section Division of Corporations			Registration Section Division of Corporations		
Clifton Building			P. O. Box 6327		
2661 Executive Center Circle			Tallahassee, FL 32314		

Tallahassee, FL 32301

CERTIFICATE OF DISSOLUTION FOR

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)	
Pursuant to the provisions of section 620.1203, Florida Statutes, this Florida partnership or limited liability limited partnership, whose certificate was file Florida Department of State on Mar 03. 2014 , assigne document number A14000000123 , hereby submits this Certificate Dissolution.	ed with the
FIRST: Reason for dissolution: (State why partnership is submitting disso	lution) =
Entity was formed as a Special Purpose Vehicle to purchase and develop Land in Broward	County -
The developed property was sold in October 2017, therefore the companies purpose.	N 23
	PH
	. ए
SECOND: A Notice of Dissolution is attached. (Check box if attached.)	
THIRD: Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days after the date this document is file Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirement be listed as the document's effective date on the Department of State's records.	
Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4	
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	