

PAGE 01/02

Page 1 of 1

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

L. SELLERS

APR 24 2009

From:

Account Name : TRIVEST SERVICE CORPORATION

Account Number : I20020000111

Phone : (305)858-2200 Fax Number : (305)858-1629

EXAMINER

DISS/TERM/CANCEL/REV OF LP/LLP

TRIVEST EQUITY PARTNERS I, LTD.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$52.50

Electronic Filing Menu

Corporate Filing Menu

04/23/2009 11:10 30585816.

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CERTIFICATE OF DISSOLUTION . FOR

-	PARTNERS I, LTD.	
(Name of Florida Limited I	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 18, 1987, assigned Florida document number A25638, hereby submits this Certificate of Dissolution.		
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)	
CEASED DOING BUSINESS.		
SECOND: A Notice of Dissi (Check box if atte	•••••	
MIRD: Effective date, if other than the	date of filing:	
(Effective date cannot be prior to nor more Department of State.)	e than 90 days after the date this document is filed by the Florida	
Signatures of each general partner os. 620.1803(3) or (4), F.S.:	or the person appointed pursuant to	
By: Trivest 1988 Fund Manager: By: Trivest Group, Inc., 148 5		
David Gershman, Princip	a).	
Filing Fee:	\$52.50	
Certified Copy (optional):	\$52,50	
Certificate of Status (optional):	\$8.75	

