## P92000000163

(Re	equestor's Name)					
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(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL.				
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Certified Copies	_ Certificates	s of Status				
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D. SCOTT OCT 0 6 2015

## **COVER LETTER**

Division of C				
SUBJECT: The	Clint and Company	y Family Limited	Partnership	
(Name of	Florida Limited Partnersh	ip or Limited Liability Lin	nited Partnership)	
The enclosed Certifi	cate of Dissolution an	d fee(s) are submitted	l for filing.	
Please return all corr	respondence concernir	ng this matter to:		
Frank P. Bevil	Lacqua, CPA			
	(Contact Person)			
Winer & Bevila	acqua, Inc.			
	(Firm/Company)			
82 North Mille	er Road			
	(Address)			
Fairlawn, OH	44333			
	(City, State and Zip Code)	<del> </del>		
For further informat	ion concerning this ma	atter, please call:		
Frank P. Bevil	Lacqua	at ( 330 )	867-3578	
(Name of Cont	act Person)		Daytime Telephone Number)	
Enclosed is a check	for the following amo	unt:	<b>28 3</b>	, <sup>,</sup>
∑ \$52.50 Filing Fee	☐ \$61.25 Filing Fee and Certificate of Status	☐ \$105.00 Filing Fee and Certified Copy	Certificate of Status	
Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle	Registratio Division of P. O. Box 6	ADDRESS:	

## CERTIFICATE OF DISSOLUTION FOR

The Clint and Company Famil	ly Limited 1	Partnership						
<u> </u>		ited Liability Limited Partnersh	ip)	_				
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 12/16/1992, assigned Florida document number, hereby submits this Certificate of Dissolution.								
FIRST: Reason for dissolution: (S	State why partr	nership is submitting dissol	lution)					
Moved out of Florida and in	ito Nevada c	on 12/22/2015:						
			<del></del>	_				
				_				
				_				
SECOND: A Notice of Disso (Check box if atta		hed.						
THIRD: Effective date, if other than the o	date of filing:	October 4, 2016						
				.•				
(Effective date cannot be prior to nor more Department of State.)	e than 90 days aft	er the date this document is file	d by the Floria	la				
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	or the person a	ppointed pursuant to						
X linfor Jarakos	<del></del>							
. <i>U</i>								
		-		_				
Filing Fee: Certified Copy (optional):	\$52.50 \$52.50		NLI SEC	6				
Certificate of Status (optional):	\$8.75		と言う	OCT				
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