H9300000897

(Re	equestor's Name)	
. (Ad	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
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H43-891

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: GEOMAR HOLDING		
(Name of Florida Limited Partners	ship or Limited Liability Limited Partnership)	
DOCUMENT NUMBER: A9300000	00897	
The enclosed Statement of Dissociation	and fee(s) are submitted for filing.	
Please return all correspondence concerr	ning this matter to:	
MICHAEL L PILAPIL		
(Contact Person)	······································	
(Firm/Company)		
703 SE 28TH AVE		
(Address)		
POMPANO BEACH, FLORIDA	A 33062	2
(City, State and Zip Cod	ie)	5 7
		G
For further information concerning this i	matter, please call:	30
MICHAEL L PILAPIL	at (954) 785-3044	
(Name of Contact Person)	(Area Code and Daytime Telephone Number)	= 1
\$52.50 Filing Fee	\$105.00 Filing Fee and Certified Copy.	7007 AUG 30 AM 11: 12
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section Registration Section		
Division of Corporations Division of Gorporations P. O. Box 6327		
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314	
CR2E118 (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:

GEOMAR HOLDINGS, LTD.

2. The name of the dissociating general partner is:

MICHAEL L PILAPIL

Signature of Dissociating General Partner

Filing Fee: Certified Copy (optional): \$52.50

\$52.50