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(Requestor's N	lame)						
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WA	IT MAIL						
(Business Entity Name)							
(Document Number)							
Certified Copies Certi	ficates of Status						
Special Instructions to Filing Officer:							
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COVER LETTER

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TO:	Registration Division of C								
SUBJECT: Warren Family Enterprises, LTD (Name of Florida Limited Partnership or Limited Liability Limited Partnership)									
The en	nclosed Certifi	cate of Dissolution an	d fee(s) are submi	tted for filing.					
Please	return all corr	espondence concernir	ng this matter to:						
Emilee	Warren								
	•	(Contact Person)							
		(Firm/Company)							
30527	Pasco Road								
		(Address)	_						
San A	ntonio, FI 33576		·						
	(City, State and Zip Code)							
For fu	rther informati	on concerning this ma	atter, please call:						
James A. Sprigg, CPA at (352) 567-1993									
(Name of Contact Person)			(Area Code	and Daytime Telephone Number)					
Enclos	sed is a check	for the following amo	unt: # <i>9</i> 7,0	50					
☑ \$52.5	50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing and Certified Copy						
STRE	ET ADDRES	S:	MAILI	NG ADDRESS:					
Registration Section		Registration Section							
Division of Corporations		Division of Corporations							
Clifton Building 2661 Executive Center Circle		P. O. Box 6327							
	assee, FL 323		Tallaha	ssee, FL 32314					
	Filed	wing form	n in Decen	ber.					

CERTIFICATE OF DISSOLUTION FOR

Filing Fee: Certified Copy (optional):	 \$52.50 \$52.50		\$55 E. 51	114 PH 12:	and the second
	fortner	****	III (III)	13 JAN	••.
s. 620.1803(3) or (4), F.S.:		pomica parsuant to	ون		
(Effective date cannot be prior to nor mor Department of State.) Signatures of each general partner		·	by the Florida		
THIRD: Effective date, if other than the					
SECOND: A Notice of Diss (Check box if atta		ed.			
2012					
FIRST: Reason for dissolution: (Partnership has ceased all operations			ŕ		
Pursuant to the provisions of section partnership or limited liability limical Florida Department of State on 110 document number A93000001202 Dissolution.	ted partnership, 18/1993	whose certificate was filed , assigned	with the Florida		
(Name of Florida Limited F	artnership or Limit	ted Liability Limited Partnership	o)		+

NOTICE OF DISSOLUTION FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

This notice is submitted by the dissolved limited partnership or limited liability limited partnership named below or the successor entity for resolution of payment of unknown claims against this limited partnership or limited liability limited partnership as provided in s. 620.1807, F.S.

This "Notice of Dissolution" is optional and is not required when filing a Certificate of Dissolution. Name of Dissolved Limited Partnership or Limited Liability Limited Partnership: Warren Family Enterprises, LTD Description of information that must be included in a claim: Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.) Warren Family Enterprises, LTD 30527 Pasco Road San Antonio, FI 33576 A claim against the above named limited partnership or limited liability limited partnership will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of the notice. Signature of a general partner or a principal of the successor entity: Emilee Warren Printed Name

Fee: No charge if included with Certificate of Dissolution. If filed separately, \$52.50.