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(Requestor's Name)		JUEN., I E.				
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PICK-UP WAIT	MAIL					
(Business Entity Name)				03/14/06	<b>-01054</b> úJá	**52.50
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## **COVER LETTER**

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TO: Registration Section	7006 MAR 14 P 3: 24				
Division of Corporations	SECRETARY 3: 24				
<b>SUBJECT:</b> The Summit at Tops	SECRETARY OF STATE hip or Limited Liability Limited Partnership)				
(Name of Florida Limited Partners	hip or Limited Liability Limited Partnership)				
The enclosed Certificate of Dissolution a	nd fee(s) are submitted for filing.				
Please return all correspondence concern	ing this matter to:				
Robert T Kamm					
(Contact Person)					
Sandcastle Resorts & Hotels					
(Firm/Company)					
200 Grand Boulevard 205-B					
(Address)					
Destin, Florida 32550					
(City, State and Zip Code	2)				
	•				
For further information concerning this r	natter, please call:				
Robert T Kamm	at ( 850 ) 622-3960				
(Name of Contact Person)	(Area Code and Daytime Telephone Number)				
Enclosed is a check for the following am	ount:				
\$52.50 Filing Fee \$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee \$113.75 Filing Fee, and Certified Copy Certified Copy, and Certificate of Status				
STREET ADDRESS:	MAILING ADDRESS:				
Registration Section	Registration Section				
Division of Corporations	Division of Corporations				
Clifton Building	P. O. Box 6327				
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314				
i aiiaiiassee, i L. Jejvi					

## CERTIFICATE OF DISSOLUTION FOR

FILED

The Summit at Tops'l, LTD
Pursuant to the provisions of section 620.1203, Florida Statutes, this florida limited partnership or limited partnership, whose certificate was filed with the Florida Department of State on, hereby submits this IDA Certificate of Dissolution.
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)
Business completed
SECOND: A Notice of Dissolution is attached.  (Check box if attached.)
THIRD: Effective date, if other than the date of filing: 12-30-04
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)
Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:
Tidos at Topsil In 68 All Vie has
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75