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COVER LETTER

TO: Registration Section	v " ;
Division of Corporations	
SUBJECT: Lorraine Y. Whiting Limited Parameter (Name of Florida Limited F	Partnership or Limited Liability Limited Partnership)
The enclosed Certificate of Dissolution Please return all correspondence concernantiony Whiting	and fee(s) are submitted for filing. rning this matter to:
(Con	tact Person)
(Fire	n/Company)
320 West 87th Street, Apt. 31	
(A	ddress)
New York, NY 10024	
(City, State	matter please call:
For further information concerning this	matter, please call:
Anthony Whiting	212 972-2025
(Name of Contact Person)	at ()
Enclosed is a check for the following as	nount:
\$52.50 Filing Fee \$61.25 Filing Fee and Certificate of Status	S105.00 Filing Fee S113.75 Filing Fee. and Certified Copy Certificate of Status
STREET ADDRESS:	MAILING ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

CERTIFICATE OF DISSOLUTION FOR

Lorraine Y. Whiting Limited Partnership,	LLLI
(Name of Florida Limited Partnership or	or Limited Liability Limited Partnership)
<u>-</u>	
FIRST: Reason for dissolution: (S	State why partnership is submitting dissolution)
Voluntary Dissolution	
SECOND: A Notice of Dissol (Check box if a	
Department of State.)	es not meet the applicable statutory filing requirements, this date will
Cinnetures of each general portrair or the p	person appointed pursuant to s. 620.1803(3) or (4), F.S.:
Signatures at each general partner or the p	person appointed pursuant to s. 020.1803(3) of (4), F.S
Anthony Whiting	——————————————————————————————————————
General Partner	
	10.7 10.7
Filing Fee:	\$52.50 \$53.50
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75
Certificate of Status (optional).	Q0112