

A96000001578

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

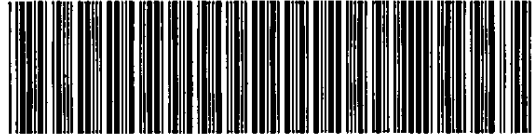
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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800289205538

08/25/16--01003--003 \*\*27.50

800289205538  
08/04/16--01019--001 \*\*25.00

FILED  
16 AUG 19 PM 4:52  
TALLAHASSEE, FLORIDA

AUG 24 2016

✓ SULKER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 5, 2016

MARK M HASNER, ESQ  
1 SE 3RD AVE #2950  
MIAMI, FL 33131

SUBJECT: THE S-T FAMILY LIMITED PARTNERSHIP  
Ref. Number: A96000001578

2016 AUG 19 PM 1:12  
TALLAHASSEE, FLORIDA

We have received your document for THE S-T FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$27.50.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker  
Regulatory Specialist II

Letter Number: 916A00016564

**CERTIFICATE OF DISSOLUTION  
FOR  
S-T FAMILY LIMITED PARTNERSHIP,  
a Florida limited partnership**

Pursuant to the provisions of section 620.1203, Florida Statutes, this Florida limited partnership, whose certificate was filed with the Florida Department of State on A96000001578, and assigned Florida documents number August 23, 1996, hereby submits this Certificate of Dissolution.

1. The Partnership is submitting this dissolution because it is no longer engaged in the business it was established for.
2. This Certificate of Dissolution shall be effective at the time of its filing with the Florida Department of State.

**GENERAL PARTNER:**

Polymax, Inc.,  
a Florida corporation

By: \_\_\_\_\_

James Black, Jr., President

16 AUG 19 PM 4:52  
TALLAHASSEE, FLORIDA