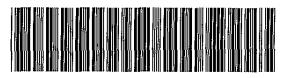
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#### **COVER LETTER**

TO: Registration Section Division of Corporations

2661 Executive Center Circle

Tallahassee, FL 32301

## SUBJECT: Benjamin R. Siegal Family Limited Partnership

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Dissolution and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: Barry A. Nelson, Esq. (Contact Person) Nelson & Levine, P.A. (Firm/Company) 2775 Sunny Isles Boulevard, Suite 118 (Address) North Miami Beach, FL 33160 (City, State and Zip Code) For further information concerning this matter, please call: Barry A. Nelson, Esq. (Area Code and Daytime Telephone Number) Enclosed is a check for the following amount: \$52.50 Filing Fee \$61.25 Filing Fee \$105.00 Filing Fee ☐ \$113.75 Filing Fee, and Certificate of and Certified Copy Certified Copy, and Status Certificate of Status STREET ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building

P. O. Box 6327

Tallahassee, FL 32314

LAW OFFICES OF

## NELSON & LEVINE, P.A.

2775 Sunny Isles Boulevard, Suite 118 North Miami Beach, Florida 33160

> info@estatetaxlawyers.com www.estatetaxlawyers.com

> Telephone: 305.932.2000 TeleFax: 305.932.6585

OF COUNSEL

Richard B. Comiter
Master of Laws in Taxation
Board Certified Taxation

Judith S. Nelson Former Judge of Compensation Claims

> Mirlene E. Dubreuze Office Manager

March 14, 2006

#### CERTIFIED MAIL 71054522644000000592 RETURN RECEIPT REQUESTED

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, Florida 32314

Barry A. Nelson

Fellow, American College of

Trust and Estate Counsel

Master of Laws in Taxation

Master of Laws in Taxation

Wills, Trusts & Estates

Marcia E. Levine

Ritu A. Mauskar

Board Certified Taxation &

RE: Benjamin R. Siegal Family Limited Partnership Our Reference No. 737 (E.2)

To Whom It May Concern:

We have enclosed a Certificate of Dissolution for the above-referenced partnership along with a check made payable to the Florida Department of State in the amount of \$52.50 which covers the filing fees.

Please acknowledge receipt of the enclosed documents by signing the acknowledgement copy of this letter and returning it to me. I have enclosed a self-addressed return envelope for your convenience.

Very truly yours,

CULLA COLM

LOURDES COSME

Assistant to Marcia E. Levine

/lc
Enclosures
H.CLIENTS/SIEGAL/LETTERS/2006-3-14 DIV OF CORP.DOC

	Receipt	of th	e Cer	rtificate of	Dis	ssolution	for	Benjamin	R. Siegal	Family	Limited	Partners	hip
and	check	in	the	amount '	of	\$52.50	îs	hereby	acknowled	ged t	his_ <u></u>	_ day	of
			, 2	2006.							<del></del> -		

#### DEPARTMENT OF STATE

Ву:			

# CERTIFICATE OF DISSOLUTION FOR

### Benjamin R. Siegal Family Limited Partnership

(Name of Florida Limited Partnership or Limited Liability Limited Partnership) Pursuant to the provisions of section 620.1203, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on January 24, 1997 \_\_\_\_\_, hereby submits this Certificate of Dissolution. FIRST: Reason for dissolution: (State why partnership is submitting dissolution) Agreement by all of the partners to dissolve the partnership. **SECOND:** A Notice of Dissolution is attached. (Check box if attached.) THIRD: Effective date, if other than the date of filing:\_ (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.: TED A. SIEGAL, CO-PRESIDENT BENJAHIN R. SIEGAL FAMILY A MARLENE R. KOHN, CO-PRESIDENT, BENJAMIN R. SIEGAL FAMILY HOLDINGS, INC. BENJAHIN R. GENERAL P GENERAL PARTNER

Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75