

A98000002048

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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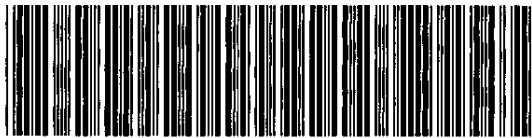
(Business Entity Name)

(Document Number)

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September 20, 2007

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

FILED  
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DIVISION OF CORPORATIONS  
07 SEP 24 PM 3:00

Re: Fannie Zimmerman Family Limited Partnership

Dear Sir or Madam:

I enclose for filing an original and one copy of a Certificate of Dissolution for Fannie Zimmerman Family Limited Partnership. Also enclosed is a check for \$105 to cover the filing fee and the certified copy charge. Please return a certified copy by mail. I enclose a postage prepaid return envelope for your convenience.

Thank you for your assistance.

Sincerely,



Eric B. Lesser

EBL:elk  
Enclosures

cc: Mr. Jeffrey Zimmerman  
Lee A. Snow, Esq.

**CERTIFICATE OF DISSOLUTION  
FOR**

FANNIE ZIMMERMAN 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 September 1, 1998, hereby submits this Certificate of Dissolution.

**FIRST:** Reason for dissolution: (State why partnership is submitting dissolution)

The partnership ceased to do business.

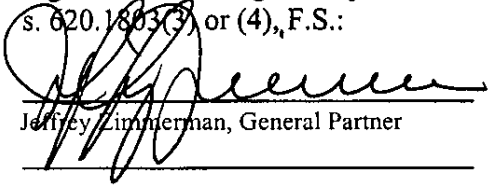
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**SECOND:** ☐ A Notice of Dissolution is attached.  
(Check box if attached.)

**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.:

  
\_\_\_\_\_  
Jeffrey Zimmerman, General Partner

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