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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	

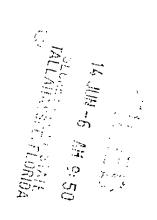
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May 8, 2014

REVI CARMI 30329 GIDRAN TERR MOUNT DORA, FL 32757

SUBJECT: SDS INVESTMENTS, LTD.

Ref. Number: A98000002384

Upon receipt of your letter and/or check(s) totaling \$61.25, no document was found. Please send your document with any fees due to:

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

Please return a copy of this letter to ensure your money is properly credited.

Please return the corrected original and one copy of 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.

Letter Number: 414A00009856

Justin M Shivers Regulatory Specialist II Registration/Qualification Section

www.sunbiz.org

## **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: 505 mlstment, LTO. (Name of Florida Limited Partnership or Limited Liability Limited Partnership)				
The enclosed Notice of Dissolution and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to:				
Pevi Carmi (Contact Person)				
(Firm/Company)				
30329 Gidran Terrace				
Mount Dorg, FL 32757 (City, State and Zip Code)				
For further information concerning this matter, please call:				
(Name of Contact Person) at (407) 832-2056  (Area Code and Daytime Telephone Number)				
Enclosed is a check for the following amount:				
S52.50 Filing Fee S61.25 Filing Fee and Certificate of Status S105.00 Filing Fee and Certificate Of Status S105.00 Filing Fee Certified Copy, and Certificate of Status				
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314				

## CERTIFICATE OF DISSOLUTION FOR

SOS Investo	nents LTD	
(Name of Florida Limited Pa	artnership or Limited Liability Limited Partne	ership)
partnership or limited liability limite Florida Department of State on	n 620.1203, Florida Statutes, this Flored partnership, whose certificate was 10/19/1998, assig 384. hereby submits this Certificate	filed with the gned Florida
FIRST: Reason for dissolution: (S	State why partnership is submitting dis	ssolution)
Financial Failu	ire & main Sub	sidiary.
SECOND: A Notice of Disso (Check box if atta		
THIRD: Effective date, if other than the o	date of filing:	·
(Effective date cannot be prior to nor more Department of State.)	e than 90 days after the date this document is	filed by the Florida
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	or the person appointed pursuant to	
	<u> </u>	
0.		
RJ. CABM		E Copy
Filing Foot		70 A
Filing Fee: Certified Copy (optional):	\$52.50 \$52.50	
Certificate of Status (optional):	\$8.75	