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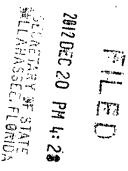
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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 19, 2012

BETH A. REOPELLE 10021 COLONNADE DR. TAMPA, FL 33647

SUBJECT: GRABARKIEWICZ FAMILY PARTNERS, LLC

Ref. Number: L01000013682

We have received your document for GRABARKIEWICZ FAMILY PARTNERS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 112A00027829

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT: GRABARKIE WICZ FAMILY
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

REOPELLE (Name of Person) GRABARKIEWICZ FAMILY PARTNERS, LLC COLONNADE DRIVE FL 33647 (City/State and Zip Code) For further information concerning this matter, please call: A REOPELLE at (813) 973 - 4310 (Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

ρ \$25.00 Filing Fee

p \$30.00 Filing Fee & Certificate of Status ρ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ρ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

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	NICOLUCE		GUST 1:		,	•
2. The Articles of	Organization were				ssigned documer	nt number
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			- o ==0	2 2		
	ssolution was appro			•		
4. A description of 608.441, Florid	of occurrence that re la Statutes, (copy 60	sulted in the limit 08.441 on back co	ed liability comp ver letter).	any's dissolution	on pursuant to sec	ction
ALL	ASSE7S	HAVE	BEEN	/ DIS	TRIBUT	E0.
			·		**************************************	
·					J	72
5. CHECK ONE	:				2 2 20 20 20 20	過層
₩ All de	bts, obligations and	liabilities of the l	imited liability co	mpany have be	en paid or disch	irged. 2
-OR-	ate provision has be				ಲ	22° ()
•	property and assets				-	- W- 19
rights and inter	ests.		.		ď	1 5 T
-7. GHECK ONE			•			三百· 60
There	are no suits pending	g against the comp	any in any court.			
☐ Adeau	ate provision has be I against it in any pe	een made for the sending suit.	atisfaction of any	judgment, ord	er or decree whic	ch may be
Signatures of the me	mbers having the sa	ime percentage of	membership inte	rests necessary	to approve the d	issolution:
Signat	ure			Printe	ed Name	
mile des	'en fre weez		M	CHARL S	GRARARK	Munce
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FILING FEE: \$25.00