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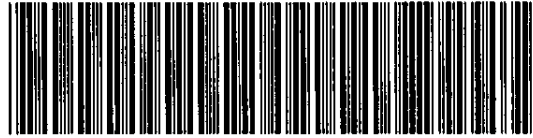
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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cacchiotti Family Ventures LP
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

DOCUMENT NUMBER: A08000000881

The enclosed Statement of Dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Donato Cacchiotti, Managing General Ptr

(Contact Person)

Cacchiotti Family Ventures LP

(Firm/Company)

11581 Enyart Rd

(Address)

Loveland, OH 45140

(City, State and Zip Code)

For further information concerning this matter, please call:

Donato Cacchiotti at (513) 300-5067
(Name of Contact Person) (Area Code and Daytime Telephone Number)

\$52.50 Filing Fee \$105.00 Filing Fee and Certified Copy.

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

CR2E118 (01/06)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**STATEMENT OF DISSOCIATION
FOR
GENERAL PARTNER
OF
LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP**

Pursuant to the provisions of section 620.1605, Florida Statutes, the undersigned general partner hereby dissociates from the following limited partnership or limited liability limited partnership:

1. The name of Limited Partnership or Limited Liability Limited Partnership is:

Cacchiotti Family Ventures LP

2. The name of the dissociating general partner is:

Ralph R. Cacchiotti (deceased)

Ralph R. Cacchiotti by Donato Cacchiotti, Estate
Signature of Dissociating General Partner EXECUTOR

Filing Fee: \$52.50
Certified Copy (optional): \$52.50