

A06000001451

(Requestor's Name)

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PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

FEB 15 2013

S. TONER

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED

Nelson Mullins

Nelson Mullins Riley & Scarborough LLP

Attorneys and Counselors at Law
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Paralegal
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February 7, 2013

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

~~Attn: Mr. Sean Toner~~

Re: Filing of Certificate of Dissolution

Dear Mr. Toner:

Please file the enclosed Certificate of Dissolution of Wellington Manor Apartments Capital Limited Partnership.

Per our telephone conversation, you received a Statement of Information filing request from me, along with a \$52.50 check. Please disregard the Statement of Information request, and use the already-received check to file this Certificate of Dissolution instead.

Please contact me at the telephone number listed above with any questions. Otherwise, please send the filed document to me in the enclosed self-addressed envelope.

Very truly yours,



Christina M. Allen
Paralegal

Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wellington Manor Apartments Capital 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:

Christina Allen, Paralegal
(Contact Person)

Nelson Mullins Riley & Scarborough LLP
(Firm/Company)

201 17th Street, Suite 1700
(Address)

Atlanta, GA 30363
(City, State and Zip Code)

For further information concerning this matter, please call:

Christina Allen, Paralegal at (404) 322-6179
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$52.50 Filing Fee \$61.25 Filing Fee and Certificate of Status \$105.00 Filing Fee and Certified Copy \$113.75 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**

Wellington Manor Apartments Capital 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 December 12, 2006, assigned Florida document number A06000001451, hereby submits this Certificate of Dissolution.

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


The partnership no longer desires to be an active company.

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.:


Bryan Mellinger

VP - Euro Wellington Manor, Inc
As: General Partner

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED