A07000001052

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(Document Number)				
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SWARREN

COVER LETTER

Section				
orporations				
rass Limited Part Florida Limited Partnersh	nersh	ip No. ited Liabi	2 lity Limi	ted Partnership)
eate of Dissolution an	d fee(s)	are sub	mitted f	or filing.
espondence concerni	ng this r	natter to	:	
(Contact Person)				
on				
(Firm/Company)				
300				
(Address)				
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on concerning this ma	atter, pl	ease call	l:	
	at (770) 717	-2429
ct Person)		(Area Coo	de and D	aytime Telephone Number)
or the following amo	unt:			
☐ \$61.25 Filing Fee and Certificate of Status				\$113.75 Filing Fee, Certified Copy, and Certificate of Status
S: ions er Circle 01		Regis Divis P. O.	stration ion of C Box 63	Section Corporations 27
	Contact Person) (Contact Person) (Contact Person) (Address) 300 (Address) 30092 City, State and Zip Code) on concerning this manager of the following amount of the fo	corporations Cass Limited Partnership or Lim	corporations Cass Limited Partnership No. Clorida Limited Partnership or Limited Liabilitate of Dissolution and fee(s) are subsespondence concerning this matter to (Contact Person) (Contact Person) (Firm/Company) 300 (Address) 30092 City, State and Zip Code) con concerning this matter, please call (Area Code) or the following amount: \$61.25 Filing Fee and Certified Certificate of Status S: MAI Register Register P. O. Talla	Corporations Cass Limited Partnership No. 2 Clorida Limited Partnership or Limited Liability Limited at each of Dissolution and fee(s) are submitted for espondence concerning this matter to: (Contact Person) (Firm/Company) 300 (Address) 30092 City, State and Zip Code) on concerning this matter, please call: at (770) 717 ct Person) for the following amount: S61.25 Filing Fee \$105.00 Filing Fee and Certificate of Status S: MAILING A Registration Division of CP. O. Box 63 Tallahassee,

CERTIFICATE OF DISSOLUTION FOR

Sawgrass Limited Partnersr				
(Name of Florida Limited Pa	rtnership or Lim	ited Liability Limited Partnersh	iip)	
Pursuant to the provisions of section partnership or limited liability limite Florida Department of State on 09/0 document number A07000001052 Dissolution.	ed partnership. 6/2007	whose certificate was file, assigne	ed with the ed Florida	
FIRST: Reason for dissolution: (S	tate why partn	ership is submitting disso	lution)	
Office building which was built on the la	ind which the P	artnership purchased was		
sold in 2015.				
_				
			_	
SECOND: A Notice of Disso (Check box if attack)		ned.		
THIRD: Effective date, if other than the d	late of filing:		·	
(Effective date cannot be prior to nor more Department of State.)	than 90 days aft	er the date this document is file	d hy the Florida	
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	or the person a	ppointed pursuant to		
s. 620.1803(3) or (4), F.S.: Vice President of Duke Realto Limited Partnership, General Partner of Sawarass Limited Partnership No: 2	<u>-</u>	Angela How		
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Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75		THE PARTY OF THE P	?
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