LI5000193332

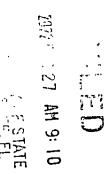
(Requestor's Name)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJE	CT: Uptown	At Liberty Park, LLC Name of Limited Liability Company)			
(Name of Limited Liability Company)					
The enc	losed Articles of Dissolution and fe-	e(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:					
	Chris Salemi				
(Name of Person)					
	Afferon Capital Management, LLC				
	(Firm/Company)				
	3401 West Cypress Street, Suite 201				
	(Address)				
	Tampa, Fl. 33607				
	(City/State and Zip Code)				
For further information concerning this matter, please call:					
	Chris Salemi	813 9062886 at ()			
(Name of Person)		(Area Code & Daytime Telephone Number)			
Enclosed	is a check for the following amount:				
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Solution			
		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY



l.	The name of a limited liability company is	29225 TO 27 AM 9: 10
	Leptown at Liberty Pari	C, ZLC
2.	Leptown at Liberty Pari The Articles of Organization were filed on	75 and assigned
	document number <u>L15000193332</u>	
3.	The delayed effective date the dissolution if not effective on the d (effective date cannot be prior to or more than 90 days l Note: If the date inserted in this block does not meet the applicable stal listed as the document's effective date on the Department of State's rec	autory filing requirements, this date will not be
4.	A description of occurrence that resulted in the limited liability of 605.0707. Florida Statutes, (copy 605.0707 on back cover letter).	ompany's dissolution pursuant to section
	This was a SPE to hold certain assets, which have been liquidated/sold a	and all obligations, if any, have been
5.	If there are no members, enter the name and address of the person	a appointed to wind up the company's
	activities and affairs:	
6. :ib	Signature of an authorized person or if there are no members, the bove to wind up the company's activities and affairs:	signature of the person appointed and listed
		bert K. Beard Printed Name
_	Signature Signature	Printed Name

FILING FEE: \$25.00