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| Judy Sherman | | | | |
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| c/o Stiles Corporation | | | | |
| 300 S.E. 2 nd Street | | | | |
| Fort Lauderdale, F 33301 | | | | |
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| (Address) | | | | |
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| (City/State/Zip/Phone #) | | | | |
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| PICK-UP WAIT | MAIL | | | |
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| (Dusiness Entity Name) | | | | |
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| Certified Copies Certificates of Statu | s | | | |
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| Special Instructions to Filing Officer: | | | | |
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SECRETARY OF STATE
TALL AHASSEF FLORIDA

CERTIFICATE OF DISSOLUTION FOR



07 DEC 18 AM 11: 38

| CORP | ORATE PARK V | LTD. | SECRETAI | RY OF STATE SEE FLORIDA |
|---|--------------------------------------|---------------------------------------|---------------------------------------|----------------------------|
| CORP (Name of Florida Limited I | artnership or Limit | ed Liability Limite | ed Partnership) | |
| Pursuant to the provisions of section partnership or limited liability limited Florida Department of State on 9 Certificate of Dissolution. | on 620.1203, Flo ted partnership, | rida Statutes, th whose certificat | is Florida limited | |
| FIRST: Reason for dissolution: (| State why partne | ership is submit | ting dissolution) | |
| All assets sold and proce | eds distribut | ed. | | |
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| SECOND: A Notice of Disso (Check box if attack) | | i . | | |
| THIRD: Effective date, if other than the | date of filing: | | | _• |
| (Effective date cannot be prior to nor more Department of State.) | e than 90 days after | the date this docu | ment is filed by the Flor | ida |
| Signatures of each general partner of s. 620.1803(3) or (4), F.S.: | or the person app | oointed pursuan | t to | |
| Corporate Park V, Inc | - | | | _ |
| Terry W. Stiles, Presiden | C | | | |
| | | | | _ |
| Filing Fee: Certified Copy (optional): | \$52.50 \$52.50 | | | |
| Certificate of Status (ontional): | \$32.30 \$8.75 | | | |