

A03000001513

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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☐

MAIL

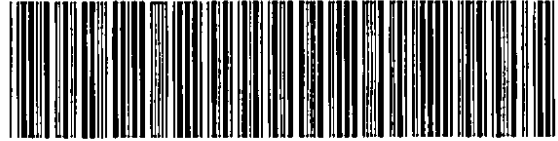
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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ALASKA PUBLIC UTILITIES DIVISION

APPROVED  
AND  
FILED  
2022 FEB 22 PM 12:50  
OFFICE OF THE STATE  
CLERK ALASKA  
JANUARY 1, 2022

**COVER LETTER**

**TO:** Registration Section

Division of Corporations

**SUBJECT:** Pine Ridge Homes Limited  
(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:

Hugh E Phillips  
(Contact Person)

\_\_\_\_\_  
(Firm/Company)

14590 Begonia Way  
(Address)

Oregon House, CA 95962  
(City, State and Zip Code)

For further information concerning this matter, please call:

Hugh E. Phillips at (352) 527 1231  
(Name of Contact Person) (Area Code) (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**

Pine Ridge Homes Limited

(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 10/20/2003, assigned Florida document number A03000001513, hereby submits this Certificate of Dissolution.

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

The Partnership has sold all assets and  
paid all outstanding liabilities as of  
12/31/21. The partnership has ceased  
operations as of 12/31/21.

**SECOND:** ☐ A Notice of Dissolution is attached.  
(Check box if attached.)

**THIRD:** Effective date, if other than the date of filing: 12/31/2021  
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:

x Michaela Jung

Michaela Jung, Pres,  
Selsen Inc, General  
Partner

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

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