#A03882

(Re	equestor's Name)				
(Ad	ldress)				
(Ad	ldress)				
(Cit	ty/State/Zip/Phon	e #)			
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(Bu	isiness Entity Na	me)			
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COVER LETTER

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TO: Registration Division of Control					
SUBJECT: Magr (Name of	nolia Terrace Apa Florida Limited Partnershi	rtments ip or Limite	<u>Ltd.</u> d Liabilit	y Limit	ed Partnership)
The enclosed Certifi	icate of Dissolution an	d fee(s) a	re subm	itted fo	or filing.
Please return all cor	respondence concernir	ng this ma	tter to:		
Scott Crossfield			_,	_	
	(Contact Person)				
BSR Trust, LLC				_	
	(Firm/Company)				
105 Tallapoosa St St	e 300				
	(Address)			-	
Mandanana	24				
Montgomery, AL 3610	(City, State and Zip Code)			-	
	(City, State and Zip code)				
For further informat	tion concerning this ma	atter, plea	se call:		
Scott Crossfield		at (334) 954	-4458
(Name of Con	tact Person)		rea Code	and Da	ytime Telephone Number)
Enclosed is a check	for the following amo	unt:			
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status		00 Filing tified Cop		☐ \$113.75 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRES	SS:		MAIL	ING A	ADDRESS:
Registration Section			Registration Section		
Division of Corporations			Division of Corporations		
Clifton Building		P. O. Box 6327			
2661 Executive Cer			Tallah	assee, l	FL 32314
Tallahassee, FL 32	301				

CERTIFICATE OF DISSOLUTION FOR

CERTIFICAT	E OF DISSOLUTION	يعمه ر
	FOR	FILED 2014 JUL-7 AKM: 18
		2014 1111
Magnolia Terrace Apartments, L	.td.	
(Name of Florida Limited Partnersh	nip or Limited Liability Limited Partnership)	ALL ALL TARY OF
Pursuant to the provisions of section 620. partnership or limited liability limited par Florida Department of State on 08/05/197 document number A03882 Dissolution.	tnership, whose certificate was filed to the state of the	Florida
FIRST: Reason for dissolution: (State v	vhy partnership is submitting dissolut	ion)
The limited partnership has sold all of its real	and personal property and	
is dissolving in accordance with its Amended	and Restated Partnership Agreement	
		
SECOND: A Notice of Dissolution (Check box if attached.)		
THIRD: Effective date, if other than the date of	filing:	·
(Effective date cannot be prior to nor more than S Department of State.)	90 days after the date this document is filed b	ry the Florida
Signatures of each general partner or the s. 620.1803(3) or (4), F.S.:	person appointed pursuant to	
Scott Crossfield, VP of Sum	mit Ame <u>rica Properties, l</u>	Inc.
Filing Fee: \$52 Certified Copy (optional): \$52		
Certificate of Status (optional): \$8.		