## 7040000017-9

(Requestor's Name)			
(Address)			
(Ac	tdress)		
(Ci	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
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## **COVER LETTER**

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TO: Registration		•	
Division of	Corporations		
SUBJECT: BGK (Name o		ip or Limited Liability Lim	ited Partnership)
The enclosed Certif	icate of Dissolution ar	nd fee(s) are submitted	for filing.
Please return all con	rrespondence concerni	ng this matter to:	
JEANNIE SKELLEY			
	(Contact Person)		
ULTIMATE STUDEN	T LIVING LLLP		
	(Firm/Company)		
100 W PLANT STRE	ET		
	(Address)		
WINTER GARDEN, I	FL 34787		,
	(City, State and Zip Code)	<u> </u>	
For further informa	tion concerning this m	atter, please call:	
JEANNIE SKELLEY		at ( 407 ) 223	2-6378
(Name of Cor	tact Person)	(Area Code and I	Daytime Telephone Number)
Enclosed is a check	for the following amo	ount:	
☑ \$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 ADDRE	SS:	MAILING	ADDRESS:
Registration Section		Registration	
Division of Corporations			Corporations
Clifton Building		P. O. Box 63	
2661 Executive Cer Tallahassee, FL 32		Tallahassee,	FL 32314

## CERTIFICATE OF DISSOLUTION FOR

BGK1 LLLP					
(Name of Florida Limited Partn	nership 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 FEBRUARY 3, 2004 , assigned Florida document number A04000000179 , hereby submits this Certificate of Dissolution.					
FIRST: Reason for dissolution: (State	FIRST: Reason for dissolution: (State why partnership is submitting dissolution)				
CLOSE OF BUSINESS					
SECOND: A Notice of Dissolut (Check box if attache	£ (17)				
THIRD: Effective date, if other than the date	of filing: DECEMBER 31, 2015				
	oan 90 days after the date this document is filed by the Florida				
Signatures of each general partner or ts. 620.1803(3) or (4), F/S.:	he person appointed pursuant to				
HENRY A. MORTON					
Certified Copy (optional):	\$52.50 \$52.50 \$8.75				