

A04000000450

(Requestor's Name)

(Address)

(Address)

Lp~ 27.50

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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Office Use Only



600082023136

01/04/07--01010--004 \*\*27.50

12/14/06--01006--014 \*\*33.75

RECEIVED  
06 DEC 14 PM 12:39  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
06 DEC 14 PM 3:50  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

CORPDIRECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301  
222-1173

FILING COVER SHEET  
ACCT. #FCA-14

CONTACT: TRACY SPEAR

PLEASE GIVE ORIGINAL SUBMISSION  
DATE AS FILE DATE.

DATE: 01/03/07

REF. #: 000163.61411

CORP. NAME: PARKVIEW VILLAGE DEVELOPMENT, LTD.

FILED  
06 DEC 14 PM 3:50  
TALLAHASSEE, FLORIDA

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION   | <input type="checkbox"/> ARTICLES OF AMENDMENT  | <input checked="" type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT               | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME                    |
| <input type="checkbox"/> FOREIGN QUALIFICATION       | <input type="checkbox"/> LIMITED PARTNERSHIP    | <input type="checkbox"/> LIMITED LIABILITY                  |
| <input type="checkbox"/> REINSTATEMENT               | <input type="checkbox"/> MERGER                 | <input type="checkbox"/> WITHDRAWAL                         |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION |   |   |
| <input type="checkbox"/> OTHER:                      |   |   |

STATE FEES PREPAID WITH CHECK# 519716 FOR \$ 27.50

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

\_\_\_\_\_ COST LIMIT: \$ \_\_\_\_\_

PLEASE RETURN:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> CERTIFIED COPY                   | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input checked="" type="checkbox"/> PLAIN STAMPED COPY |
| <input checked="" type="checkbox"/> CERTIFICATE OF STATUS |   |  |

Examiner's Initials



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 14, 2006

CORPDIRECT AGENTS

TALLAHASSEE, FL

SUBJECT: PARKVIEW VILLAGE DEVELOPMENT, LTD.  
Ref. Number: A04000000450

PLEASE GIVE ORIGINAL SUBMISSION  
DATE AS FILE DATE.

FILED  
06 DEC 14 PM 3:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for PARKVIEW VILLAGE DEVELOPMENT, LTD. and your check(s) totaling \$33.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$33.75 payment.

The "STATEMENT OF DISSOLUTION" that you have submitted is used only for GENERAL PARTNERSHIPS.

LIMITED PARTNERSHIPS use the attached CERTIFICATE OF DISSOLUTION which may be filed either with or without a NOTICE OF DISSOLUTION.

The TOTAL REQUIRED to file the CERTIFICATE OF DISSOLUTION is \$52.50. You would add \$8.75 for a Certificate of Status.

Please return the completed CERTIFICATE OF DISSOLUTION (either with or without the NOTICE) along with an additional \$27.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr  
Document Specialist

Letter Number: 906A00071167

PLEASE GIVE ORIGINAL SUBMISSION  
DATE AS FILE DATE.

**CERTIFICATE OF DISSOLUTION  
FOR**

**Parkview Village Development, Ltd.**

(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 March 22, 2004, hereby submits this Certificate of Dissolution.

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

All business has been completed. Winding up of its  
business has been completed.

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

**THIRD:** Effective date, if other than the date of filing: \_\_\_\_\_

*(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)*

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

Parkview Village Development, Inc.

By

Jacqueline Rivera, President

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

**FILED**  
06 DEC 14 PM 3:50  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA