# 404000001215

(Re	equestor's Name)		
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(Cit	ty/State/Zip/Phone	<b>⇒</b> #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	ne)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			
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04/18/07--01010--006 \*\*25.00

05/07/07--01010--006 \*\*27.50

SECRETARY OF STATE

4Y -7 PH 12:

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: The Fountains at Country side Investors, Ltd. (Name of Limited Liability Company)
The enclosed Articles of Dissolution and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Brad Gordon (Name of Person)
Atlantic American Realty Group, LLC (Firm/Company)
101 E. Kennedy Blvd. Suite 3300
Tampa, Fl 33602 (City/State and Zip Code)
For further information concerning this matter, please call:  PASSE OF HAY  HAY
For further information concerning this matter, please call:    Kaven Boykins   at (813) 318-9444   For further information concerning this matter, please call:    Kaven Boykins   at (813) 318-9444   For further information concerning this matter, please call:   Kaven Boykins   at (813) 318-9444   For further information concerning this matter, please call:   Concern
Enclosed is a check for the following amount:  \$\sum_{\text{\$\frac{1}{2}

# MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

### STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



### FLORIDA DEPARTMENT OF STATE **Division of Corporations**

April 19, 2007

**BRAD GORDON** ALTANTIC AMERICAN REALTY GROUP LLC 101 E KENNEDY BLVD STE 3300 TAMPA, FL 33602

SUBJECT: THE FOUNTAINS AT COUNTRYSIDE INVESTORS, LTD.

Ref. Number: A0400001215

We have received your document for THE FOUNTAINS AT COUNTRYSIDE INVESTORS, LTD. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

There is a balance due of \$27.50.

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

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Marsha Thomas **Document Specialist** 

Letter Number: 107A00026489

# CERTIFICATE OF DISSOLUTION FOR

	rhyside Investors, Limited	
(Name of Florida Limited P	artnership or Limited Liability Limited Partnership	o)
partnership or limited liability limit	n 620.1203, Florida Statutes, this Florida I ed partnership, whose certificate was filed [My 13, 2004], hereby st	with the
FIRST: Reason for dissolution: (S	State why partnership is submitting dissolu	ution)
Business closed.		
out to the first		
	·	ZZ O
		7 MA ECRI LAA
SECOND: A Notice of Dissol (Check box if attac		ASS
`	,	TILEL
THIRD: Effective date, if other than the	late of filing:	
(Effective date cannot be prior to nor more Department of State.)	than 90 days after the date this document is filed	OF STATE 46
Signatures of each general partner of	or the person appointed pursuant to	
s. 620.1803(3) or (4), F.S.:		
18thour		
Brud Gordon		
	,	
Filing Fee:	\$52.50	
Certified Copy (optional):	\$52.50 \$52.50	
Certificate of Status (optional):	\$8.75	