# #A0500000632

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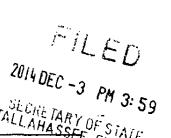
EXAMPLES DEC 11 2014

#### **COVER LETTER**

TO: Registration Division of C			
SUBJECT: Sofrai	n Tuscany, Ltd. Florida Limited Partnershi	ip or Limited Liability Lim	nited Partnership)
The enclosed Certifi	cate of Dissolution an	d fee(s) are submitted	for filing.
Please return all corr	respondence concernir	ng this matter to:	
Suzan E. Roth, Esq.			
	(Contact Person)		
Thrasher Liss & Smith	, LLC		
	(Firm/Company)		
Five Concourse Parkv	av. Suite 2600		
	(Address)		
Atlanta, GA 30328	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
(	City, State and Zip Code)		
For further informat	ion concerning this ma	atter, please call:	
Sue Ford		at ( 404 ) 76	0-0209
(Name of Cont	act Person)		Daytime Telephone Number)
Enclosed is a check	for the following amo	unt:	
☑ \$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 ADDRES	· ·	MAILING	ADDRESS:
Registration Section		Registration Section	
Division of Corporations		•	Corporations
Clifton Building		P. O. Box 6327	
2661 Executive Cen		Tallahassee	, FL 32314
Tallahassee, FL 323	301		

EFFECTIVE DATE

## CERTIFICATE OF DISSOLUTION FOR



Sofran Tuscany, Ltd.	TALLAHASSEE. FLE
(Name of Florida Limited Pr	artnership or Limited Liability Limited Partnership)
partnership or limited liability limite Florida Department of State on Mar	n 620.1203, Florida Statutes, this Florida limited ed partnership, whose certificate was filed with the ch 30, 2005, assigned Florida, hereby submits this Certificate of
FIRST: Reason for dissolution: (S	State why partnership is submitting dissolution)
Partnership no longer owns property in	Florida and is no longer doing business.
	<u> </u>
SECOND: A Notice of Disso (Check box if attack)	
THIRD: Effective date, if other than the d	late of filing: December 31, 2014
(Effective date cannot be prior to nor more Department of State.)	than 90 days after the date this document is filed by the Florida
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	r the person appointed pursuant to
TL	IE SOFRAN CORPORATION, a Delaware corporation
,,,,	C SOFTWAN CORPORATION, a Delaware corporation
Ву	Norman Zavalkoff, Executive Vice President
-•	Norman Zavalkoff, Executive Vice President
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$9.75



#### NOTICE OF DISSOLUTION FOR

# 2014 DEC -3 PM 3:5

### FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

This notice is submitted by the dissolved limited partnership or limited liability limited partnership named below or the successor entity for resolution of payment of unknown claims against this limited partnership or limited liability limited partnership as provided in s. 620.1807, F.S.

This "Notice of Dissolution" is optional and is not required when filing a Certificate of Dissolution.

Name of Dissolved Limited Partnership or Limited Liability Limited Partnership:			
Sofran Tuscany, Ltd.			
Description of information that must be included in a claim:			
Claimant's name, address, telephone number and e-mail address; amount of alleged claim and			
a detailed description of the event or circumstance giving rise to the alleged claim.			
Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.)			
Sofran Tuscany, Ltd.			
c/o Presud Associates			
5500 Ave Royalmount, Suite 300			
Montreal, Quebec CANADA H4P 1H7			

A claim against the above named limited partnership or limited liability limited partnership will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of the notice.

Signature of a general partner or a principal of the successor entity:

THE SOFRAN CORPORATION, a Delaware corporation

Norman Zayalkoff, Executive Vice President

Fee: No charge if included with Certificate of Dissolution. If filed separately, \$52.50.