06328

(Requestor's Name)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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Special Instructions to Filing Officer:			

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T. CLINE OCT 16 2012 EXAMINER



October 10, 2012

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

> Re: Orange City Villas II, Ltd.; A11159

> > Housing Assistance of Orange City, Ltd.; A06326

Enclosed for filing are an original and one copy of the Certificate of Dissolution for each of the above limited partnerships as well as two checks in the amount of \$52.50 for payment of the filing fee. Please file the original and return a file-stamped copy of each in the enclosed self-addressed postage paid envelopes. If there are any questions or additional information is required, please feel free to contact me at (303) 691-4382. Thank you for your assistance.

Sincerely,

Lucinda M. Ehrhard Assistant Secretary

/lme

Enclosure

\community

COVER LETTER

	Registration S Division of C				
SUBJE			CE OF ORANGE C		
The end	closed Certific	cate of Dissolution an	d fee(s) are submitted f	or filing.	
Please	return all corr	espondence concernir	ng this matter to:		
Lucino	da M. Ehrha	rd (Contact Person)			
Apartı	ment Investi	ment and Manager (Firm/Company)	nent Company		
4582 5	S Ulster St,	Suite 1100 (Address)			
Denve	er, CO 8023	,			
For fur	ther informati	on concerning this ma	atter, please call:		
Lucino	da M. Ehrha (Name of Conta		/	1-4382 ratine Telephone Number)	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Enclose	ed is a check f	or the following amo		ASSE ASSE	2 <u>6</u> 2 15
✓ \$52.50) Filing Fee	☐ \$61.25 Filing Fee and Certificate of Status	☐ \$105.00 Filing Fee and Certified Copy	S113.75 Filing Fee,	TH 2: 0:

STREET ADDRESS:

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

MAILING ADDRESS:

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

CERTIFICATE OF DISSOLUTION FOR

HOUSING ASSISTANCE OF	ORANGE CITY, LTD.
(Name of Florida Limited Pa	artnership or Limited Liability Limited Partnership)
partnership or limited liability limite Florida Department of State on <u>Fe</u>	bruary 20, 1978, assigned Florida, hereby submits this Certificate of
FIRST: Reason for dissolution: (S	state why partnership is submitting dissolution)
The events for dissolution that	are specified in the partnership agreement
have occurred.	
	· · · · · · · · · · · · · · · · · · ·
SECOND: A Notice of Disso (Check box if attack)	
THIRD: Effective date, if other than the d	late of filing:
(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 o s. 620.1803(3) or (4), F.S.: he National Housing Partnership, general partner y: National Corporation for Housing Partnerships, its gen y: Lucinda M. Ehrhard, Assistant Secretary	
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75