(Re	questor's Name)			
(Ād	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	#)		
PICK-UP	WAIT .	MAIL		
(Bu	siness Entity Name	e)		
(Document Number)				
Certified Copies	_ Certificates o	of Status		
Special Instructions to Filing Officer:				
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DIVISION DE ANTIL: 46

G. MCLEOD

JAN 2 4 2008

EXAMINER

UG PROPERTIES, LLC

120 HOWARD STREET, SUITE 450, SAN FRANCISCO CA 94105

Tel: 415-707-7000 Fax: 415-707-7009

January 18, 2008

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re: UG Gator, LP

Dear Sir or Madam:

Enclosed are two (2) original signed Certificate of Dissolution forms for the cancellation of the above listed limited partnership. Also enclosed is a return envelope for copies of the certified form to be returned to our office for our records.

Please contact the undersigned should you have any questions.

_Sincerely,

Jennifer Thenemann

COVER LETTER

TO:	Registration Division of	n Section Corporations		
SUBJ		Gator, LP of Florida Limited Partnersh	ip or Limited Liabilit	y Limited Partnership)
The en	closed Certi	ficate of Dissolution ar	nd fee(s) are subm	itted for filing.
Please	return all co	rrespondence concerni	ng this matter to:	
Jenr	nifer The	nemann		
UG	Properti	(Contact Person)		
400		(Firm/Company)	<u> </u>	
120	Howard	Street, Suite 4	50	
San	Francis	co, CA 94105		
		(City, State and Zip Code)		
For fur	ther informa	tion concerning this ma	atter, please call:	
Jenn	ifer		at (415	707-7000 and Daytime Telephone Number)
	(Name of Cor	tact Person)	(Area Code	and Daytime Telephone Number)
Enclose	ed is a check	for the following amou	unt:	
□ \$52.50) Filing Fee	\$61.25 Filing Fee and Certificate of Status		
Registr Divisio Clifton 2661 E:	ET ADDRE ation Section n of Corpora Building xecutive Cer ssee, FL 32	tions	Registra Divisior P. O. Bo	NG ADDRESS: ation Section of Corporations ox 6327 ssee, FL 32314

CERTIFICATE OF DISSOLUTION FOR

UG Gator, LP	_
(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 July 3, 2007 , hereby submits this Certificate of Dissolution.	
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)	
Written consent of the general partner and a majority	_
in interest of the limited partners was obtained	_
	08
	08 JAN 23
	- 23
SECOND: A Notice of Dissolution is attached. (Check box if attached.)	94 :IIIII
THIRD: Effective date, if other than the date of filing:	2 :
(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 of the person appointed pursuant to s. 620:1803(3) or (4), F.S.	
	-
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	