

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

DISS/TERM/CANCEL/REV OF LP/LLP SPRINGTREE APARTMENTS, LTD.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$52.50

10 DEC 22 PM I2: 05

POEC 22 PA Electronic Filing Menu

Corporate Filing Menu

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G. MCLEOD

DEC 23 2010

EXAMINER

COVER LETTER

TO:	Registration Division of	n Section Corporations			
SUBJ	ECT: Springt	ree Apartments, Ltd.			
	(Name o	f Florida Limited Partnersh	ip or Limited Liabili	ly Limited Partnership)	
The cr	aclosed Certif	ficate of Dissolution ar	nd fee(s) are subm	itted for filing.	
Pleasc	return all co	rrespondence concerni	ng this matter to:		
Michel	le La Palle				
		(Contact Person)		_	
Equity !	Residential				
	······································	(Firm/Company)		•	
Two I	North Riversi	de Plaza, Suite 400			
		(Address)		•	
Chica	go, IL 60606				
		(City, State and Zip Code)		•	
For fu	rther informa	tion concerning this m	atter, please call:		
Michel	la La Pelle		at (_312	y 928-84 63	
	(Name of Con	tact Person)	(Area Code	and Daytime Telephone Number)	
Enclos	sed is a check	for the following amo	unt:		
□ \$ 52.5	io Piling Fee	561.25 Filing Fee and Certificate of Status	S105.00 Filing and Certified Cop		
STRE	ET ADDRES	SS:	MAIL	ING ADDRESS:	
Registration Section		Registration Section			
Division of Corporations			Division of Corporations		
Clifton Building		P. O. Box 6327			
	Executive Cer		Tallaha	ssec, FL 32314	
i allah	assec FL 32	301			

CERTIFICATE OF DISSOLUTION FOR

Springtree Apartments, Ltd.						
(Name of Florida Limited F	ertnerskip or Limited Liebil	lity Limited Partnership)				
Pursuant to the provisions of section partnership or limited liability limit Florida Department of State on 8/1 document number A10976 Dissolution.						
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)						
The partners have decided to d	ssolve the partnershi	р.				
,						
		ŗ	10			
SECOND: A Notice of Disso (Check box if atta		5	DEC 22 F			
THIRD: Effective date, if other than the	date of filing:	<u></u>				
(Effective date cannot be prior to nor mor Department of State.)	e than 90 days after the date	e this document is filed by the El	grida 😭			
Signatures of each general partner s. 620.1803(3) or (4), F.S.:	or the person appointed	pursuant to	-			
See Attached						
Filing Fee:	 \$52.50					
Certified Copy (optional):	\$52.50	·				
Certificate of Status (optional):	\$8.75					

EQUITY RESIDENTIAL, a Maryland real estate investment trust

By:

Name: Michelle La Pelle Title: Assistant Secretary

LEXFORD GP II, LLC, a Delaware limited liability company

By:

Lexford Properties, L.P., an Ohio limited partnership, its member and manager

By:

Lexford Partners, L.L.C., an Ohio limited liability company, its general partner

Ву:

ERP Operating Limited Partnership, an Illinois limited partnership, its member

By:

Equity Residential, a Maryland real estate investment trust, its general partner

Ву:

Name: Michelle La Pelle Title: Assistant Secretary