A12000000128

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

Office Use Only



300245033173

Merger

300245033173 02/25/13--01028--023 **102.50



DR 3/5/13

COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: PINEHURST GARDEN APARTMENTS, LTD.				
Name of Surviving Party				
The enclosed Certificate of Merger and fee(s) are submitte	d for filing.			
Please return all correspondence concerning this matter to:				
Garth D. Bonney, Esq.				
Contact Person				
Bonney & Associates, P.A.				
Firm/Company				
P.O. Box 737				
Address	_			
Panama City, FL 32402				
City, State and Zip Code	_			
berntate@knology.net				
E-mail address: (to be used for future annual report notification)	_			
For further information concerning this matter, please call				
Garth D. Bonney, Esq. at (850	215-6840			
Name of Contact Person Area Code a	nd Daytime Telephone Number			
Certified copy (optional) \$52.50				
STREET ADDRESS: MAII	MAILING ADDRESS:			
	Amendment Section			
	Division of Corporations			
_ · · · · · · · · · · · · · · · · · · ·	P. O. Box 6327			
2661 Executive Center Circle Tallah Tallahassee, FL 32301	nassee, FL 32314			

FILED

Certificate of Merger 2013 MAR -4 AM 11: 01

For
Florida Partnership TALLAHASSEE, FLORIDA

The following Certificate of Merger is submitted in accordance with s. 620.8918, Florida Statutes.

<u>FIRST:</u> The exact name, form/entity type, and jurisdiction for each <u>**merging**</u> party are as follows:

<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type
Pinehurst Garden Apartments	Florida	General Partnership
SECOND: The exact trame, form/entity as follows:	type, and jurisdiction	on of the <u>surviving</u> party are
Name	<u>Jurisdiction</u>	Form/Entity Type
Pinehurst Garden Apartments,	Florida	Limited Partnership
Ltd.		
THIRD: The date the merger is effective	ve under the governir	ng laws of the
surviving party is: January 1, 20	013	
(NOTE: If aumilian is a Florida nautum	ahin affaatiya data a	annat ha mi'anta nan mana

(NOTE: If survivor is a Florida partnership, effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State. If survivor is not a Florida partnership, effective date shall be as provided in the governing law of the surviving party.)

FOURTH: The merger was approved by each party as required by its governing law.

in this state, the stree	ving party is a foreign organization not qualified to transact business t address and mailing address of an office which the Florida may use for the purposes of s. 620.8919(2), F.S., are as follows:
Street address:	
Mailing address:	
wianing address.	

SIXTH: Other provisions, if any, relating to the merger:

SEVENTH: Signature(s) for Each Party:

(Merger must be signed by all general partners of each partnership and by the authorized representative of each other party.)

Name of Entity/Organization:	Signature(s):	Typed or Printed Name of Individual:
Pinehurst Garden Apartments	Frankie Pouch	Frankie Gowdy, Trustee
Pinehurst Garden Apartments	W.C. Sauly V	W.C. Grimsley, Jr.
Pinehurst Garden Apartments Corp	W.C. Buch	W.C. Grimsley, Jr.

Fees: Filing Fees:

\$25.00 Per Party

Certified Copy: Certificate of Status: \$8.75 (Optional)

\$52.50 (Optional)