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Florida Department of State Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA00000023 Phone : (850)205-8842 Fax Number : (850)878-5368



DISS/TERM/CANCEL/REV OF LP/LLP
BOCA COMMUNITY PARTNERS LP

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$52,50





Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

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TO: Registration Section Division of Corporations

SUBJECT: BOCA COMMUNITY PARTNERS LP

1

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Michael Bellman

(Contact Person)

Revest Inc.

(Firm/Company)

162 Cumberland Street, Suite 300

(Address)

Toronto, Ontario M5R 3N5

(City, State and Zip Code)

For further information concerning this matter, please call:

 Courtney L. Scanlon - c/o Hodgson Russ LLP
 at (716) 848-1538

 (Name of Contact Person)
 (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

🔀 \$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	S105.00 Filing Fee and Certified Copy	Centified Cop Certificate of	y, and 🥳	•	
STREET ADDRES Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle	Registration	Corporations 327	E.c.	5 APR -7 AM 8:57	

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4/7/2015 11:19:13 From: To: 8506176383

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CERTIFICATE OF DISSOLUTION FOR

BOCA COMMUNITY PARTNERS 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 March 8, 2013 ______, assigned Florida document number A13000000130 ______, hereby submits this Certificate of Dissolution.

FIRST: Reason for dissolution: (State why partnership is submitting dissolution)

The limited partnership is no longer conducting business in the state of Florida.

SECOND: A Notice of Dissolution is attached. (Check box if attached.)

THIRD: Effective date, if other than the date of filing:

(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 or the person appointed pursuant to

s. 670.1803/3) or (4), F.S.:

Greg Coleman, President of US Vest GP Inc

Filing Fee:\$52.50Certified Copy (optional):\$52.50Certificate of Status (optional):\$8.75



FL044 - 05/23/2003 C T System Caller