A17600006666

| (Reque | stor's Name) | | | |
|---|------------------------|--|--|--|
| (Addres | s) | | | |
| (Addres | s) | | | |
| (City/St | ate/Zip/Phone #) | | | |
| PICK-UP | WAIT MAIL | | | |
| (Busine | ss Entity Name) | | | |
| (Docum | ent Number) | | | |
| Certified Copies | Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | | |
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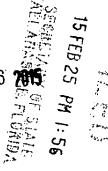
Office Use Only



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J. Shivers FEB 2 6 7015





February 26, 2015

FLORIDA FILING & SEARCH SERVICES

SUBJECT: JASPER APARTMENTS, LTD.

Ref. Number: A1300000666

We have received your document for JASPER APARTMENTS, LTD. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

No notice of dissolution was attached as indicated on the certificate of dissolution.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 715A00004014

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

02-25-15

NAME: JASPER APARTMENTS, LTD

TYPE OF FILING: ARTICLES OF DISSOLUTION

COST:

52.50

RETURN: PLAIN COPY

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

| TO: Registration : Division of C | | | | |
|--|--|---------------------------|---------------|--|
| SUBJECT: Jaspe (Name of | er Apartments, Ltd Florida Limited Partnership | or Limited Li | ability Limit | ted Partnership) |
| The enclosed Certific | cate of Dissolution and | I fee(s) are s | ubmitted f | or filing. |
| Please return all corr | espondence concerning | g this matter | to: | |
| Joanne D. Flanagan | | | | |
| | (Contact Person) | | | |
| JDF, LLC | | | | |
| | (Firm/Company) | | | |
| 340 Pemberwick Road | 4 | | | |
| 340 T GITIDET WICK TROOK | (Address) | | | |
| | , , | | | |
| Greenwich, CT 06831 | City, State and Zip Code) | | | |
| (' | City, State and Zip Code) | | | |
| For further informati | on concerning this ma | tter, please c | all: | |
| Teresa C. Behan | | at (203 |) 869 | -0900 |
| (Name of Cont | act Person) | | Code and Da | aytime Telephone Number) |
| Enclosed is a check | for the following amou | ınt: | | |
| ✓ \$52.50 Filing Fee | \$61.25 Filing Fee and Certificate of Status | S105.00 F and Certifie | | \$113.75 Filing Fee, Certified Copy, and Certificate of Status |
| STREET ADDRES | S: | M. | AILING A | ADDRESS: |
| Registration Section | | Registration Section | | |
| Division of Corporations | | Division of Corporations | | |
| Clifton Building | | P. O. Box 6327 | | |
| 2661 Executive Centrallahassee, FL 323 | | Ta | llahassee, | FL 32314 |

CERTIFICATE OF DISSOLUTION FOR

| (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 October 29, 2013, assigned Florida document number A13000000666, hereby submits this Certificate of Dissolution. | | | | | | |
| FIRST: Reason for dissolution: (State why partnership is submitting dissolution) | | | | | | |
| Entity is no longer needed | | | | | | |
| | _ | | | | | |
| SECOND: 7 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 Floric Department of State.) | la | | | | | |
| Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.: | FEB 2 | i | | | | |
| Jasper Apartments 6/116 | _5 | E Antise E | | | | |
| Jasper Apartments GP. 1LC By: Teg Member 1 FL 11, LLC By: Kristin M. H. W. President | PH : 56 | - Table | | | | |
| Filing Fee: \$52.50 | | | | | | |
| Certified Copy (optional): \$52.50 | | | | | | |
| Certificate of Status (optional): \$8.75 | | | | | | |