A14445

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
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(Business Entity Name)					
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B. BOSTICK

JUN 1 0 2014

FXMMMER

COVER LETTER

TO: Registration Division of C				
SUBJECT: Live	E Oaks Ree Florida Limited Partnersh	ip or Limited Liability Lim	ited Partnership)	
The enclosed Certific	cate of Dissolution an	nd fee(s) are submitted	for filing.	
Please return all corr	espondence concerni	ng this matter to:		
tlew Ye	(Contact Person) + Properties (Firm/Company) (Address) (Address) City, State and Zip Code) ion concerning this m	0027		
DAVID A	1 pert	at (Z\Z) \(\)	586.6756	
(Name of Cont	act Person)	(Area Code and I	S86.6756 Daytime Telephone Number)	
Enclosed is a check	for the following amo	ount:		
☐ \$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy	Continue of Children Ca	17
STREET ADDRES Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 323	tions ter Circle	Registration	Corporations 327	Control of the second

CERTIFICATE OF DISSOLUTION FOR

:	Live	Onks	'Kealty	H5300	الحاجة ل	۲ 🖍		
	(Name of	Florida Limited	d Partnership o	or Limited L	iability Limited	Partnership)		
partnership	or limite partment number	d liability fin	nited partner	rship, who	Statutes, this ose certificate	was filed v	vith the	
FIRST: Re	eason for	dissolution:	(State why	partnershi	ip is submitti	ng dissoluti	on)	
		e of				C	,	
					<i>9</i> e			
								—
	(Cl	Notice of Dineck box if a	ttached.)				,	
THIRD: Effe	ective date.	, if other than th	ne date of filing	g:	<u>.</u>		_	
(Effective date Department o	e cannot be f State.)	prior to nor m	ore than 90 da	iys after the	date this docun	nent is filed by	the Flor	ida
Signatures 6 s. 620.1803			er or the pers	son appoir	nted pursuant	to	_	,
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HRM	Red Pa	Ty. Inc	-	K	breneral	Barrier .		
Filing Fee: Certified C Certificate	Copy (opt	tional): s (optional):	\$52.50 \$52.50 \$8.75				HASSETT BE	
							7 co) #: 21;



April 15, 2014

DAVID ALPERT SILVERPOINT PROPERTIES GROUP, INC. 520 LEXINGTON AVENUE, 29TH FLOOR NEW YORK, NY 10022

SUBJECT: LIVE OAKS REALTY ASSOCIATES, LTD.

Ref. Number: A14445

We have received your document for LIVE OAKS REALTY ASSOCIATES, LTD. and your check(s) totaling \$61.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by all of the general partners.

The effective date must be specific and cannot be prior to the date of filing.

Please return 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.

Barbara Bostick Regulatory Specialist II

Letter Number: 514A00008109



May 20, 2014

DAVID ALPERT SILVERPOINT PROPERTIES GROUP, INC. 570 LEXINGTON AVENUE, 29TH FLOOR NEW YORK, NY 10022

SUBJECT: LIVE OAKS REALTY ASSOCIATES, LTD.

Ref. Number: A14445

We have received your document for LIVE OAKS REALTY ASSOCIATES, LTD. and your check(s) totaling \$61.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

Barbara Bostick Regulatory Specialist II

Letter Number: 214A00010918