

(Requestor's Name)				
(Address)				
(Ad	ldress)	· · · · · · · · · · · · · · · · · · ·		
(Cit	ty/State/Zip/Phone	e #)		
•	,	,		
PICK-UP	☐ WAIT	MAIL		
,				
· (D)	ısiness Entity Nan			
, (60	isiness chuty ivan	ile)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			
		·		
,	~ ·			
(20)				

Office Use Only



600282753236

02/29/16--01039--009 **52.50





FLORIDA DEPARTMENT OF STATE Division of Corporations

March 11, 2016

JAN HEFLINGER
PICERNE DEVELOPMENT CORPORATION
247 N WESTMONTE DRIVE
ALTAMONTE SPRINGS, FL 32714

SUBJECT: EDGEWATER AFFORDABLE HOUSING, LP

Ref. Number: A15000000007

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

A Florida limited partnership or limited liability limited partnership must file a Certificate of Dissolution (with or without a Notice of Dissolution) in order to dissolve the limited partnership. The fee to file the Certificate of Dissolution (with or without a Notice of Dissolution) is \$52.50. Once the limited partnership or limited liability limited partnership has filed a Certificate of Dissolution and completed winding up its affairs, it may file a Statement of Termination. The fee to file the Statement of Termination is an additional \$52.50.

Please return your document, along with a copy of this letter, within 60 days for your filing will be considered abandoned.

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

Shelia H Young Regulatory Specialist II

Letter Number: 016A00005130

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EDGEWATER AFFORDABLE HOUSING, LP

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

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

Please return all co	rrespondence concerni	ng this matter to:				
JAN HEFLING	GER					
	(Contact Person)	 				
PICERNE DE	VELOPMENT C	ORPORATION				
	(Firm/Company)					
247 N WEST	MONTE DR					
	(Address)					
ALTAMONTE	SPRINGS, FL 3	2714				
•	(City, State and Zip Code))				
For further informa	tion concerning this m	atter, please call:				
JAN HEFLINGER		_at (_407) 7720200				
(Name of Contact Person)		(Area Code and Daytime Telephone Number)				
Enclosed is a check for the following amount;						
☑\$52.50 Filing Fec	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy	\$113.75 Filing Fee, Certified Copy, and Certificate of Status			
STREET ADDRESS:		MAILING				
Registration Section		Registration Section				
Division of Corporations Clifton Building		Division of Corporations P. O. Box 6327				

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

NOTICE OF DISSOLUTION FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

This notice is submitted by the dissolved limited partnership or limited liability limited partnership named below or the successor entity for resolution of payment of unknown claims against this limited partnership or limited liability limited partnership as provided in s. 620.1807, F.S.

This "Notice of Dissolution Dissolution.	on" is optional and is not re	quired when filing a Certificate	of
Name of Dissolved Limite	ed Partnership or Limited L	iability Limited Partnership:	
EDGEWATER AF	FORDABLE HOUSI	NG, LP	,
Description of information	n that must be included in a	claim:	
NO LONGER CON	DUCTING BUSINES	SS .	
		<u> </u>	
Mailing address where cla Department of State)	nims can be sent: (Claims c	annot be sent to the Florida	6 MAR 2
247 N WESTMON	TE DR	ري الله الله	25 F
ALTAMONTE SPF	RINGS, FL 32714		
		RIDA	
		or limited liability limited bree the claim is commenced w	ithin
Signature of a general par	tner or a principal of the suc	ccessor entity:	
ROBERT M PICER	RNE	7	
Printed Nar	ne	Signature	
Filing Fee:	\$52.50		

\$52.50

Certified Copy (optional):

CERTIFICATE OF DISSOLUTION FOR

Characterists I Provide Limited B			wan on a him \
(Name of Florida Limited P	artnership or Limi	ted Liability Limited Pa	rtnership)
Pursuant to the provisions of section partnership or limited liability limit Florida Department of State on 08/document number A15000000007 Dissolution.	ed partnership, 15/2015	whose certificate w	as filed with the ssigned Florida
FIRST: Reason for dissolution: (S	State why partn	ership is submitting	dissolution)
NO LONGER CONDUCTING BUSINE	ss		
;			
	•		
SECOND: A Notice of Disso (Check box if atta		ed.	
THIRD: Effective date, if other than the	date of filing: 03/2	21/2016	
(Effective date cannot be prior to nor more Department of State.)	e than 90 days afte	r the date this documen	t is filed by the Ptoride AR
Signatures of each general partner os. 620.1803(3) or (4). F.S.:	or the person ap	pointed pursuant to	25 PM TARY OF VSSEELF
	_		<u> </u>
	-		
:	· ·		
Filing Fee:	\$52.50		
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75		:
certificate of Status (optional):	JU.15		