

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number: 120160000017 Phone

: (855)498-5500

Fax Number

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## DISS/TERM/CANCEL/REV OF LP/LLP UNIVERSITY FOUNTAINS, LTD.

Certificate of Status	0
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Estimated Charge	\$52.50

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## CERTIFICATE OF DISSOLUTION FOR

UNIVERSITY FOUNTAINS, LTD.	
(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 03/17/1988 , assigned Florida document number A26117 , hereby submits this Certificate of Dissolution.	
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)	
The Partnership has ceased transacting business and the Partners have determined that the Partnership	22
shall not be engaged in any further business, as specified in Partnership Agreement of the Partnership.	21 JUL 21
SECOND: A Notice of Dissolution is attached.  (Check box if attached.)	3
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 Flo Department of State.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this do not be listed as the document's effective date on the Department of State's records.	
Signatures of dichigeneral partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:  RILEA UNIVERSITY CORP., General Partner  Alan Ojeda, President	<del></del>
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	