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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 : FCA000000023 Phone : (850)222-1092

Fax Number : (850)878-5368

13 OCT 14 PM 12: 00 SECRETARY OF STATE

DISS/TERM/CANCEL/REV OF LP/LLP US SWISSINCOME II LTD.

 Certificate of Status
 0

 Certified Copy
 0

 Page Count
 04

 Estimated Charge
 \$52.50

Electronic Filing Menu

Corporate Filing Menu

Help

J. SAULSBERRY EXAMINER

OCT 15 2013

COVER LETTER

TO: Registration	Section Corporations				
SUBJECT: US Swis	sincome II, 1.TD. Florida Limited Partnershi	p or Limited Li	ability Limi	(ted Partnership)	-
The enclosed Certifi	cate of Dissolution an	d fee(s) are s	ıbmitted 1	for filing.	
Please return all cor	respondence concernia	ng this matter	to:		
Niloufar Warriner					
	(Contact Person)				
BVT Equity Holdings L	gc				1-2
	(Firm/Company)				- CD
400 Interstate N Pkwy,	Suite 700				2013 OCT
	(Address)				
Atlanta, GA 30339	,				्रं म
	(City, State and Zip Code)				TE TE
For further informat	tion concerning this m	atter, please o	all:		- 98 H
Niloufar Warriner		at (770) 618·	-3534	7.7
(Name of Con	tact Person)	(Алев	Code and D	Paytime Telephone Number)	,
Enclosed is a check	for the following amo	unt:			
\$52.50 Filing Fee	S61.25 Filing Fee and Certificate of Status	s105.00 I and Certific	•	\$113.75 Filing Fee, Certified Copy, and Certificate of Status	
STREET ADDRES	SS:	M	AILING	ADDRESS:	
Registration Section	· ·		gistration		
Division of Corpora	itions			Corporations	
Clifton Building			O. Box 63		
2661 Executive Cer		Ta	Цаћа ssee ,	FL 32314	

CERTIFICATE OF DISSOLUTION FOR

US Swissincome 11, Ltd.		
(Name of Florida Limited Pa	artnership or Limited Liability Limited Partnership)	
partnership or limited liability limit	n 620.1203, Florida Statutes, this Florida limited and partnership, whose certificate was filed with the 2/1998 assigned Florida a hereby submits this Certificate of	
Dissolution.	B noteby suchains this continuous of	
FIRST: Reason for dissolution: (S	State why partnership is submitting dissolution)	
Entity has been dissalved.		
		7.1
		- ;
SECOND: A Notice of Disso (Check box if atta		
TRIRD: Effective date, if other than the	date of filing:	. <u></u>
•	e than 90 days after the date this document is filed by the Flor	idā (
s. 620.1803(3) or (4), F.S.:	or the person appointed pursuant to	
M. Scot Wearn	Vice Presidet	
		_
	·	
Filing Fee:	\$52.50	
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75	
ceretteute of praters (obnough).	30.75	

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" is optional and is not required when filing a Certificate of Dissolution.

Name of Dissolved Limited Partnership or Limited Liability Limited Partnership:

Description of information that must be included in a claim:

Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.)

400 Interstate N Pkwy, Suite 700 Atlanta, GA 30339

A claim against the above named limited partnership or limited liability limited partnership will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of the notice.

Signature of a general partner or a principal of the successor entity:

M. Suff Waw

Printed Name

Signature

Fee: No charge if included with Certificate of Dissolution. If filed separately,

FL044 - 05/22/2008 C T System Online

\$52.50.