

A31660

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

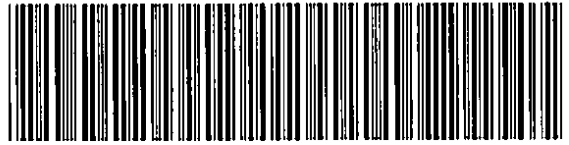
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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18 JUN -11 AM 10:49

RECEIVED  
18 JUN -11 PM 10:17

J. J. EGGETT  
JUN 05 2018

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 240477 7775081

AUTHORIZATION :

COST LIMIT :

*Handwritten signature*  
\$752.50

ORDER DATE : June 4, 2018

ORDER TIME : 2:06 PM

ORDER NO. : 240477-005

CUSTOMER NO: 7775081

DOMESTIC FILINGS

NAME: WINDROSE SOUTHSIDE PROPERTIES,  
LTD.

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft - EXT# 62925

EXAMINER'S INITIALS: \_\_\_\_\_

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Windrose Southside Properties, Ltd.  
\_\_\_\_\_  
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Dissolution and fee(s) are submitted for filing.  
Please return all correspondence concerning this matter to:

\_\_\_\_\_  
(Contact Person)

Welltower Inc.

\_\_\_\_\_  
(Firm/Company)

4500 Dorr Street

\_\_\_\_\_  
(Address)

Toledo, OH 43615

\_\_\_\_\_  
(City, State and Zip Code)

For further information concerning this matter, please call:

\_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$52.50 Filing Fee
- \$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:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**CERTIFICATE OF DISSOLUTION  
FOR**

Windrose Southside Properties, 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 06/18/1991, assigned Florida document number A31660, hereby submits this Certificate of Dissolution.

**FIRST:** Reason for dissolution: (State why partnership is submitting dissolution)

Voluntary dissolution decided by its General Partner.

**SECOND:**  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 Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:

DocuSigned by:  
Mary Ellen Pisanelli  
400556F3A0314EA ..

\_\_\_\_\_  
WMPT Southside Management, L.L.C., its general partner  
Mary Ellen Pisanelli, Authorized Person

Filing Fee: \$52.50  
Certified Copy (optional): \$52.50  
Certificate of Status (optional): \$8.75

18 JUN -6 AM 9:49

**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:  
Windrose Southside Properties, Ltd.

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Description of information that must be included in a claim:

Claimant name and address, amount of claim, contact name and address.

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

Welltower Inc.

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4500 Dorr Street

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Toledo, OH 43615

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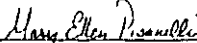
A claim against the above named limited partnership or limited liability limited partnership will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of the notice.

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

Mary Ellen Pisanelli, Authorized Person

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Printed Name

DocuSigned by:  
  
SIGNATURE 0314EA

**Fee: No charge if included with Certificate of Dissolution. If filed separately, \$52.50.**