

A 93000000901

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

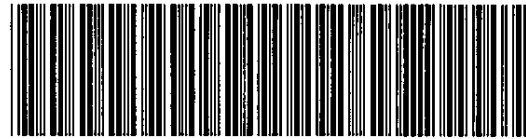
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2014 MAY 29 12 30 06

B. BOSTICK

MAY - 6 2014

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Villa Biscayne of South Dade, 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:

Laura Pippin
(Contact Person)

Royal American
(Firm/Company)

1002 W. 23rd Street, Suite 400
(Address)

Panama City, FL 32405
(City, State and Zip Code)

For further information concerning this matter, please call:

Laura Pippin at (850) 769-8981
(Name of Contact Person) (Area Code and 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**

VILLA BISCAYNE OF SOUTH DADE, 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 September 3, 1993, assigned Florida document number A93000000901, hereby submits this Certificate of Dissolution.

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

Pursuant to Section 1.5 of the Second Amended and Restated Agreement of Limited Partnership,

the Partnership is being dissolved following the sale of all of the assets of the Partnership.

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.)

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

VSR OF PC, LLC

By: Southern Coastal Mortgage Company, its Manager

By: Lauretta J. Pippin
Lauretta J. Pippin
Secretary

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