

A94000000451

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entry Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000184827520

09/02/10--01026--011 **455.00

FILED
10 SEP -2 AM 11:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

SEP 03 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lakeview Grove, Ltd.
Name of Florida Limited Partnership or Limited Liability Limited Partnership

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

Please return all correspondence concerning this matter to:

William K. Budd

Contact Person

Raymond James Tax Credit Funds, Inc.

Firm/Company

880 Carillon Parkway, Dept. 20485

Address

St. Petersburg, FL 33716

City, State and Zip Code

bill.budd@raymondjames.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William Budd

Name of Contact Person

at (727)

567-4820

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

FILED
10 SEP -2 AM 11:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE
OF
REVOCATION OF DISSOLUTION
FOR**

Lakeview Grove, Ltd.

Name of Florida Limited Partnership or Limited Liability Limited Partnership

Pursuant to the provisions of section 620.1812, Florida Statutes, this Florida limited partnership or limited liability limited partnership hereby submits this Certificate of Revocation of Dissolution.

FIRST: The effective date of the certificate of dissolution being revoked is:

September 2, 2010

SECOND: The revocation of dissolution was authorized in the same manner as the dissolution.

THIRD: The revocation of dissolution was authorized on:

September 1, 2010

FOURTH: Attached is a copy of the certificate of dissolution.

FIFTH: 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.:

~~Value Partners-~~ Florida L.L.C. per FL. Stat. 620.1803(3)

By: Value Partners, Inc., its sole member

By: _____

Ronald M. Diner, President

Filing Fee: \$52.50

Certified Copy (optional): \$52.50

Certificate of Status (optional): \$ 8.75

FILED
10 SEP -2 AM 11:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DISSOLUTION
FOR**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 MAY -5 PM 12:41

LAKEVIEW GROVE, 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 March 23, 1994 assigned Florida document number A94000000451, hereby submits this Certificate of Dissolution.

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

As provided for in the partnership agreement for the limited partnership due to the death of

the individual who was the sole general partner of the limited partnership since the limited partner

failed to elect to continue the limited partnership within 90 days of the death of such last remaining

general partner pursuant to Florida Statute Section 620.1801(1)(a).

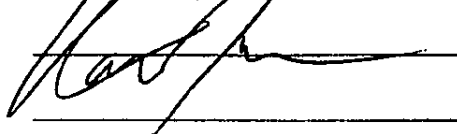
SECOND: ☒ A Notice of Dissolution is attached.
(Check box if attached.)

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.:

Value Partners, Florida L.L.C. per FL. Stat. § 620.1803(3)
By: Value Partners, Inc., its sole member
By: Ronald M. Diner, President



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

**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:

LAKEVIEW GROVE, LTD.

Description of information that must be included in a claim:

Name and address of person or entity owed the claim, the amount of the claim, a detailed explanation

of the basis of the claim and all supporting documentation relating to the claim.

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

The entity appointed to wind up the affairs of the limited partnership pursuant to FL. Stat. 620.1803(3):

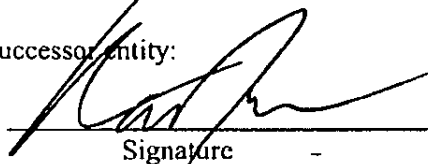
Value Partners- Florida L.L.C., c/o Raymond James Tax Credit Funds, Inc., 880 Carillon Parkway,

Department 05485, Saint Petersburg, Florida 33716

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:

Value Partners- Florida L.L.C. per FL. Stat. §620.1803(3)
By: Value Partners, Inc., its sole member
By: Ronald M. Diner, President


Signature

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