

A97000001139

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

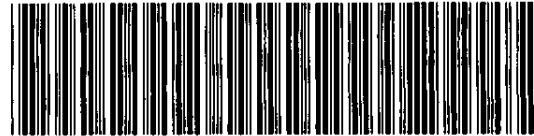
(Business Entity Name)

(Document Number)

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2016 DEC 21 A 10:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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DEPARTMENT OF REVENUE

16 DEC 21 PM 4:14

D. BRUCE  
DEC 22 2016

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

ACCOUNT NO. : I20000000195  
REFERENCE : 433280 4348715  
AUTHORIZATION : *[Signature]*  
COST LIMIT : \$ 52,500

ORDER DATE : December 21, 2016  
ORDER TIME : 3:08 PM  
ORDER NO. : 433280-020  
CUSTOMER NO: 4348715

**FILED**  
2016 DEC 21 A 10:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOMESTIC FILINGS

NAME: 3520 TRYON MORTGAGE HOLDINGS  
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: Courtney Williams - EXT# 62935

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

**CERTIFICATE OF DISSOLUTION  
FOR**

3520 Tryon Mortgage Holdings 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 May 21, 1997, assigned Florida document number A97000001139, hereby submits this Certificate of Dissolution.

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

Disposition by the Partnership of all or substantially all of its assets pursuant  
to the Agreement of Limited Partnership of the Company

**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.:

Tryon Avenue Mortgage LLC, general partner

By: \_\_\_\_\_

Michael Sherry  
Manager

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

2018 DEC 21 A 10:00  
SECRETARY OF STATE  
ALLAHSEE, FLORIDA

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