

A9700000 1311

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

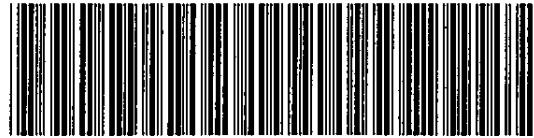
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/21/07--01049--028 **105.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 MAY 21 PM 1:00

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FOUNTAINHEAD APARTMENTS-NATIONAL, 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:

Natalie Webb
(Contact Person)
Tarragon Corporation
(Firm/Company)
3100 Monticello Ave., Ste 200
(Address)
Dallas, TX 75205
(City, State and Zip Code)

For further information concerning this matter, please call:

Natalie Webb at (214) 599-2233
(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

Check #
TR10000039467

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
SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 MAY 21 PM 1:00

**CERTIFICATE OF DISSOLUTION
FOR**

FOUNTAINHEAD APARTMENTS-NATIONAL, 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 June 13, 1997, hereby submits this Certificate of Dissolution.

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

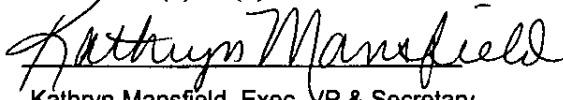
No longer conducting business.

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.:



Kathryn Mansfield, Exec. VP & Secretary

Fountainhead, Inc., General Partner

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

FILED
STATE
SECRETARY OF
DIVISION OF CORPORATIONS
07 MAY 21 PM 1:00