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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(City/State/Zip/Filone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(,				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
APR - 1 2014				
A. LUNT				

Office Use Only



600258283486

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COVER LETTER

Division of	Corporations			
SUBJECT: Bra	onkland Ga	rdens Assoc	ciates, LTD	
		ip or Limited Liability Limi		_
The enclosed Certif	icate of Dissolution ar	nd fee(s) are submitted t	for filing.	
Please return all cor	respondence concerni	ng this matter to:		
Mari	(Contact Person)	o Lipkin		
9 Bro	(Firm/Company)	 	S. C. E.S.	2014 HAR 27
East B.	(Address) runswick N (City, State and Zip Code)	J 08816	HASSER I	
,	(City, State and 2rp Code)			FE 1
For further informat	ion concerning this m	atter, please call:	DRIĐ	CAD CAD
Maria	Lipkin	_at (<u>908</u>) 9	121-5693 aytime Telephone Number)	_
(Name of Cont	tact Person)	(Area Code and D	aytime Telephone Number)	
Enclosed is a check	for the following amo	ount:		
\$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:		MAILING A		
Registration Section		Registration Section		
Division of Corporations Clifton Building		Division of Corporations P. O. Box 6327		
2661 Executive Center Circle		Tallahassee, FL 32314		

Tallahassee, FL 32301

CERTIFICATE OF DISSOLUTION FOR

Brookland Garden Associates, LTD (Name of Florida Limited Partnership or Limited Liability Limited Partnership)	
(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	
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)	20
Closing of Partnership	2014 KAR
Description of the second of t	R 27
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	2
	ري ال
SECOND: A Notice of Dissolution is attached. (Check box if attached.)	
THIRD: Effective date, if other than the date of filing: 12-31-2013	
(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.:	
Chillerno E. Troncoro	
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$9.75	

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 Limite	•		
Brookland Gardens As	sociates, LID	<u> </u>	
Description of information that must be included in		ME	2014 KAR
Closing Partnership		- (1)	70
		1827 1827	27
		10°C	P#
		01K50	ربي ات هو
Mailing address where claims can be sent: (Claim Department of State.)		:2 7	
9 Brookhill Rd. East Brunswick, NJ	088/6		
·			,
A claim against the above named limited partnersl partnership will be barred unless a proceeding to e 4 years after the filing of the notice.		within	
Signature of a general partner or a principal of the	successor entity:		د
Guillerno Troncoso Printed Name	Signature	<u> </u>	U.J
i tilited i fairie	Digitature		

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