

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H14000208702 3)))



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To:

Division of Corporations

: (850)617-6383 Fax Number

From:

Account Name : C T CORPORATION

Account Number : FCA000000023

Phone Fax Number : (850)222-1092

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DISS/TERM/CANCEL/REV OF LP/LLP NHPAHP STERLING WOODS LIMITED PARTNERSHIP

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Certificate of Status	0
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Corporate Filing Menu

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9/5/2014

		COVE	ER LETTER			
TO:	O: Registration Section Division of Corporations					
SUB	ECT: NHPA	IP Sterling Woods Limited	Partnership			
:	(Nume o	Filorida Limited Partnersh	ip or Limited Lial	oilly Lim	ited Partnership)	
The e	nclosed Cortif	icate of Dissolution an	d fec(s) are sui	bmitted	for filing.	
Please	e return all coi	respondence concerni	ng this matter t	0:		
Lynn /	Almeida					
		(Contact Person)				
Oower	Financial Corpo					
-		(Firm/Company)				
1661 1	<b>Vorthington Ros</b>	d				
•		(Address)				
West I	Palm Bench, FL 3	3409				
		(City, State and Zip Code)	<u> </u>	<del></del>		
For ft	ırther informa	tion concerning this m	atter, please ca	il:		
Lynn /	Almeida		al ( <sup>561</sup>	682-	-8954	
	(Name of Con	tact Person)	(Area C	ode and D	aytime Telephone Number)	
Enclo	sed is a check	for the following amo	uŋt;			
<b>⊠ \$</b> 52.	50 Filing Fee	☐ \$61.25 Filing Foe and Certificate of Status	S105.00 Pill and Certified (		☐ \$113.75 Filing Fee, Certified Copy, and Certificate of Status	
STREET ADDRESS:		MA	ILING.	ADDRESS:		
Registration Section		Registration Section				
Divisi	ion of Corpora	tions	Division of Corporations			
Clifton Building		P. O. Box 6327				
2661 Executive Center Circle		Talle	ahassee,	FL 32314		
Tallal	nassee, FL 32	301				

9/8/2014 9:42:52 From: To: 8506176383

(2/4)

850-B17-6381

9/8/2014 8:10:27 AM PACE 1/001 Fax Server



September 8, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORP

SUBJECT: NHPAHP STERLING WOODS LIMITED PARTNERSHIP

REF: A98000000137

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Neysa Culligan Regulatory Specialist II FAX Aud. #: H14000208702 Letter Number: 914A00019038

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IVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

\*RE-SUBMIT\*
Places set to contact filing date of submission 95.

## CERTIFICATE OF DISSOLUTION FOR

NHPAHP Starling Woods Climited Partne	qidan	
(Name of Florida Limited F	anneiship or Li	mited Liebility Limited Partnership)
partnership or limited liability limit	ted partnershi	Florida Statutes, this Florida limited p, whose certificate was filed with the assigned Florida areby submits this Certificate of
FIRST: Reason for dissolution: (	State why par	tnership is submitting dissolution)
The Limited Partnership is no longer conc	lucting business	in the state.
		<u> </u>
SECOND: A Notice of Disse (Check box if atta		ched.
THIRD: Effective date, if other than the	date of filing:	
(Effective date cannot be prior to nor mort Department of State.)	e than 90 days q	Ner the date this document is filed by the Florida
Signatures of each general partner os. 620.1803(3) or (4), F.S.:	or the person	appointed pursuant to
NHPAHP Affordable Housing Falls Landi	ng, Inc.,	David Ho
ax General Partner	<del>-</del>	David Ho, Vice President
	_	
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75	

TLOI4 - 05/23/2006 CT System Online