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





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COVER LETTER

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TO: Registration Division of	n Section Corporations						
SUBJECT: SPR (Name o	ING ARBOR PAR f Florida Limited Partnersh	RTNEF	RS, LTD ited Liabilit	y Lim	ited Partnership)		
The enclosed Certi	ficate of Dissolution an	nd fee(s)	are subm	itted	for filing.		
Please return all co	rrespondence concerni	ng this r	natter to:				
KRISTY J. WHITE				_			
	(Contact Person)						
AHG-GROUP							
	(Firm/Company)			-			
700 WEST MORSE	BOULEVARD, SUITE 22	20					
	(Address)		 	-			
MAINTED DADIC EL C	NOID 4 00700						
WINTER PARK, FLO	(City, State and Zip Code)			-			
	(City, State and Zip Code)						
For further informa	tion concerning this ma	atter, pl	ease call:				
KRISTY J. WHITE		at (407) 691	I-5613		
(Name of Cor	ntact Person)		(Area Code	./	aytime Telephone Number)		
Enclosed is a check	for the following amo	unt:					
☐ \$52.50 Filing Fee	✓ \$61.25 Filing Fee and Certificate of Status		05.00 Filing ertified Cop		\$113.75 Filing Fee, Certified Copy, and Certificate of Status		
STREET ADDRESS:			MAIL	ING .	ADDRESS:		
Registration Section			Registration Section				
Division of Corporations			Division of Corporations				
Clifton Building			P. O. Box 6327				
2661 Executive Center Circle Tallahassee, FL 32301			Tallahassee, FL 32314				

CERTIFICATE OF DISSOLUTION FOR

SPRING ARBOR PARTNE (Name of Florida Limited Pa	RS, LTD artnership or Limited Liability Limited Partnership)		<u> </u>
partnership or limited liability limite Florida Department of State on DEC	n 620.1203, Florida Statutes, this Florida lined partnership, whose certificate was filed vote the company of t	with the Florida	
FIRST: Reason for dissolution: (S	State why partnership is submitting dissolut	ion)	
PARTNERSHIP IS NO LONGER ACTI	VE	 .	_
	:	SECRE	- F
		ASSET ENTY	<u>~</u>
SECOND: A Notice of Dissolution is attached. (Check box if attached.)			
THIRD: Effective date, if other than the c	date of filing:		ப
(Effective date cannot be prior to nor more Department of State.)	e than 90 days after the date this document is filed b	y the Florida	7
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	or the person appointed pursuant to		
PLEASE SEE ATTACHE	D SIGNATURE PAGE		_
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75	<u> </u>	_

Signature page for Certificate of Dissolution for Spring Arbor Partners, LTD

By: SAS Spring Arbor Managers, LLC, a Florida limited liability company, its General Partner By: Southern Affordable Services, Inc., a Florida not-for-profit corporation, its sole member

Jay P. Brock, Vice President

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