

A98000002536

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

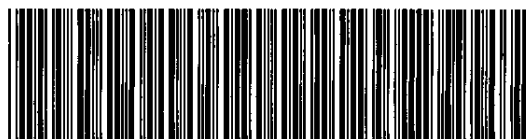
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. BURCH JUL 26 2014

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LEXINGTON CLUB AT SPRING ARBOR PARTNERS, 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:

KRISTY J. WHITE
(Contact Person)

AHG-GROUP
(Firm/Company)

700 WEST MORSE BOULEVARD, SUITE 220
(Address)

WINTER PARK, FLORIDA 32789
(City, State and Zip Code)

For further information concerning this matter, please call:

KRISTY J. WHITE at (407) 691-5613
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$52.50 Filing Fee | <input checked="" type="checkbox"/> \$61.25 Filing Fee
and Certificate of
Status | <input type="checkbox"/> \$105.00 Filing Fee
and Certified Copy | <input type="checkbox"/> \$113.75 Filing Fee,
Certified Copy, and
Certificate of Status |
|---|--|--|---|

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

**CERTIFICATE OF DISSOLUTION
FOR**

LEXINGTON CLUB AT SPRING ARBOR PARTNERS, 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 DECEMBER 13, 1999, assigned Florida document number A98000002536, hereby submits this Certificate of Dissolution.

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

PARTNERSHIP IS NO LONGER ACTIVE

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.:

PLEASE SEE ATTACHED SIGNATURE PAGE

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


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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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Signature page for Certificate of Dissolution for Lexington Club at Spring Arbor Partners, LTD

By: SAS Lexington Club at 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

By: 
Jay P. Brock, Vice President

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