

A99000001154

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

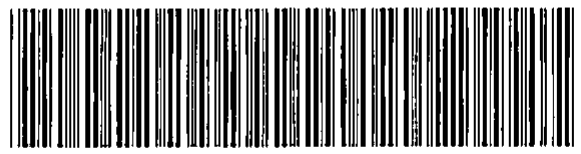
(Business Entity Name)

(Document Number)

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2019 JUN 27 AM 11:46

2019 JUN 27 AM 11:09

T GLASS  
JUN 28 2019

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 823940 4338458  
AUTHORIZATION : *Lydia Cohen*  
COST LIMIT : \$ 52.50

ORDER DATE : June 27, 2019  
ORDER TIME : 9:55 AM  
ORDER NO. : 823940-010  
CUSTOMER NO: 4338458

DOMESTIC FILINGS

NAME: NHPAHP DEVELOPMENT III  
LIMITED PARTNERSHIP

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lydia Cohen - EXT# 62974

EXAMINER'S INITIALS: \_\_\_\_\_

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**CERTIFICATE OF DISSOLUTION  
FOR**

NHPAHP DEVELOPMENT III 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 07/15/1999, assigned Florida document number A99000001154, hereby submits this Certificate of Dissolution.

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

The limited partnership is no longer conducting business in the state.

**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.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

2019 JUN 27 11:46 AM  
APPROVED AND FILED

Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:

NHPAHP Development III Corporation

By: \_\_\_\_\_

John V. Britti, Executive Vice President, Chief Financial Officer and Treasurer

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