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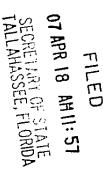
(Requestor's Name)
(Address)
(Address)
. (City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
(======================================
Certified Copies Certificates of Status
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Special Instructions to Filing Officer: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

TO: Registration Section Division of Corporations	
SUBJECT: CSR Holiday, Ltd. (Name of Florida Limited Part	nership or Limited Liability Limited Partnership)
The enclosed Certificate of Dissolution	on and fee(s) are submitted for filing.
Please return all correspondence conc	erning this matter to:
Sharon H. Romano	
(Contact Person)	
Root Company	
(Firm/Company)	
275 Clyde Morris	Blvd.
(Address)	
Ormond Beach, FL	32174
(City, State and Zip C	
For further information concerning th	is matter, please call:
Sharon Romano	at (386) 671-4908
(Name of Contact Person)	(Area Code and Daytime Telephone Number)
Enclosed is a check for the following	amount:
■ \$52.50 Filing Fee ■ X \$61.25 Filing F and Certificate of Status	ee \$\begin{array}{c} \$105.00 \text{ Filing Fee,} & \$\left(\sum \text{Status} \) \$\text{Certified Copy, and} & \$\text{Certificate of Status} \end{array}\$
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314
Tallahassee, FL 32301	

CERTIFICATE OF DISSOLUTION FOR

CSR Holiday, Ltd.	
(Name of Florida Limited Partnership or Lim	ited Liability Limited Partnership)
Pursuant to the provisions of section 620.1203, Fl partnership or limited liability limited partnership Florida Department of State on August 31, 19 Certificate of Dissolution.	, whose certificate was filed with the
FIRST: Reason for dissolution: (State why partr	nership is submitting dissolution)
Assets held by the partnership	have been sold.
	SEC FALL
	APR LAHA
	<u>\SS</u>
SECOND: X A Notice of Dissolution is attached (Check box if attached.)	AM II: 57 OF STATE E, FLORIDA ed.
THIRD: Effective date, if other than the date of filing:	·
(Effective date cannot be prior to nor more than 90 days afte.)	er the date this document is filed by the Florida
Signatures of each general partner or the person ap	ppointed pursuant to
s. 620.1803(3) or (4), F.S.: Root/Real Estate Corp.	RDT, L.L.C., L.C.
Philip Maroney, Senior Vice President	Philip Maroney, Vice President
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	

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.

Dissolution.	
Name of Dissolved Limited Partnership or Limited Liability Limited Partnership:	
CSR Holiday, Ltd.	•
Description of information that must be included in a claim:	
Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.)	7 APR 18 AH 11:5
Root Company	18
275 Clyde Morris Blvd.	THE THE
Ormond Beach, FL 32174	ST DRIEDA
	_
A claim against the above named limited partnership or limited liability limited partnership will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of the notice.	n
Signature of a general partner or a principal of the successor entity: Root Real Estate Corp. Philip Maroney, Sr. Vice Pres.	_
Printed Name Signature	

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