Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000190906 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I2000000195 Phone : (850) 521-1000

Fax Number : (850)558-1515

DISS/TERM/CANCEL/REV OF LP/LLP WINDROSE COLUMBIA PROPERTIES, LTD.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$52.50

nic Filing Menu

Corporate Filing Menu

Help

G. MCLEOD

JUL 28 2011

EXAMINER

COVER LETTER

Division of	Corporations			
	se Columbia Properties			
(Name of	Florida Limited Partnersh	ip or Limited Liability Limi	ted Partnership)	
The enclosed Certif	icate of Dissolution an	d fee(s) are submitted	for filing,	
Please return all cor	respondence concerni	ng this matter to:		
Stacey Stamitoles, F	aralegal			
-	(Contact Person)			
Shumaker, Loop & K	(endrick, LLP			
	(Firm/Company)			
1000 Jackson Street				
	(Address)			
Toledo, Ohio 43604				
<u> </u>	(City, State and Zip Code)			
For further informa	tion concerning this m	atter, please call:		
Stacey Stamitoles, F	Paralegal	at (419) 32	1-1232	
(Name of Con	tact Person)	(Area Code and D	aytime Telephone Number)	
Enclosed is a check	for the following amo	ount:		
☐ \$52.50 Filing Fee	S61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fcc and Certified Copy	S113.75 Flling Fee, Certified Copy, and Certificate of Status	
STREET ADDRE	SS:	MAILING	ADDRESS:	
Registration Section		Registration Section		
Division of Corpora	ations	Division of Corporations		
Clifton Building	. 0. 1	-, -,	P. O. Box 6327 Tallahassee, FL 32314	
2661 Executive Cer Taliahassee, FL 32		I alianassee,	TL 32314	
1 ananassee, 1 L 32	JV 1			

CERTIFICATE OF DISSOLUTION FOR

Windrose Columbia Properties, Ltd.					
(Name of Florida Limited F	artnership or Li	mited Liability Limited Partnership)			
Pursuant to the provisions of section partnership or limited liability limit Florida Department of State on 12/2 document number A99000002122 Dissolution.	ed partnershi 17/99		the		
	D 1	4 - 40 - 5 4 - 5.00 - 29 - 4.00 - N			
FIRST: Reason for dissolution: (State why par	thership is submitting dissolution)			
No longer doing business.					
					
			1 () () () () () () () ()	\Rightarrow	
SECOND: A Notice of Disso	olution is atta	ched.			Ĭ.
(Check box if atta	iched.)		Carrie	27	Charles
THIRD: Effective date, if other than the	date of filing: <u>U</u>	on filing		AH	\$ 11
(Effective date cannot be prior to nor mor Department of State.)	e than 90 days q	fler the date this document is filed by the		II: 53	Congress of
Signatures of each general partner as. 620.1803(3) or (4), F.S.:	or the person	appointed pursuant to	المنطقة		
Muhart A. C	_	Michael A. Crabtree, Senior Vice President and Treasurer of WMI Columbia Management, L.L.C., General Partner	- 7		
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$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 ontional and is not required when filling a Certificate of

Dissolution.
Name of Dissolved Limited Partnership or Limited Liability Limited Partnership:
Windrose Columbia Properties, Ltd.
Description of information that must be included in a claim:
Claimant name and address, amount of claim, contact name and address.
Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.) Health Care REIT, Inc.
4500 Dorr Street
Toledo, Ohio 43615
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. Signature of a general partner or a principal of the successor entity: Michael A. Crabtree, Senior Vice President and Treasurer Printed Name Signature
1 thited tyaine alguardic

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