

B98000000020

UNITED DOMINION

Residential Communities

February 1, 1999

VIA OVERNIGHT MAIL

Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399


Re: Polo Chase Venture Limited Partnership/Certificate of Cancellation
Our File No. 0001.405

Dear Sir or Madam:

Enclosed for filing with your Department is a Certificate of Cancellation for Polo Chase Venture Limited Partnership. Please make this cancellation effective as of December 8, 1998. Also enclosed is a check in the amount of \$52.50 to cover the cancellation fees. Please mail an acknowledgement of the cancellation to D. Fleet Wallace at 10 South Sixth Street, Richmond, Virginia 23219. I can be reached during the day at 804/344-1689 and by fax at 804/788-4607.

Should you have any questions regarding these documents, please give me a call.

Sincerely,



D. Fleet Wallace
Corporate Counsel

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Enclosures

Name	
Availability	
Document Examiner	DCC
Updater	ACC
Updater Verifier	DCC
Acknowledgement	DCC
W. P. Verifier	DCC

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FILED
99 FEB -3 AM 10:30
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

United Dominion Realty Trust, Inc.

10 South Sixth Street • Richmond, Virginia 23219-3802 • Tel: 804.780.2691 • Fax: 804.343.1912

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2/1/99 (jmm)

**CERTIFICATE OF CANCELLATION
FOR**

POLO CHASE VENTURE LIMITED PARTNERSHIP

(insert name currently on file with Florida Dept. of State)

FILED
99 FEB -3 AM 10:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 620.174, Florida Statutes, this foreign limited partnership hereby submits this certificate of cancellation in order to cancel its registration with the Florida Department of State.

AMERICAN APARTMENT COMMUNITIES HOLDINGS, INC.
General Partner

By: D. Fleet Wallace

D. FLEET WALLACE

Title: Assistant Vice President

STATE OF VIRGINIA AT LARGE

CITY

COUNTY OF RICHMOND

On this 2nd day of FEBRUARY, 19 99, D. FLEET WALLACE, Assistant Vice President of American Apartment Communities Holdings, Inc.

personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

Janice M. Horne
Notary Public Signature

JANICE M. HORNE

Notary's Printed Name

My Commission Expires: FEBRUARY 28, 2000

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