

000000012800

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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2018 DEC 20 AM 9:23

DEPT. OF STATE
TALLAHASSEE, FL

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18 DEC 20 PM 4:22

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DEC 21

S. PRATHER

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

ACCOUNT NO. : I20000000195

REFERENCE : 553891 7463422

AUTHORIZATION :



COST LIMIT : \$ 55.00

ORDER DATE : December 20, 2018

ORDER TIME : 3:22 PM

ORDER NO. : 553891-005

CUSTOMER NO: 7463422

DOMESTIC FILINGS

NAME: HARG-AB, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft - EXT# 62925

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Harg - AB, LLC
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Thomas W Tife
(Name of Person)

HealthAmerica Realty Group, LLC
(Firm/Company)

3280 Howell Mill Rd, Ste 100
(Address)

Atlanta Ga 30327
(City/State and Zip Code)

For further information concerning this matter, please call:

Amrita Parekh at (404) 869 2674
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee and Certificate of Dissolution

☐ \$55.00 Filing Fee, Certificate of Dissolution &
Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

HARG-AB, LLC

2. The Articles of Organization were filed on 10/19/2000 and assigned

document number L00000012800

3. The delayed effective date the dissolution if not effective on the date of filing: _____
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

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.

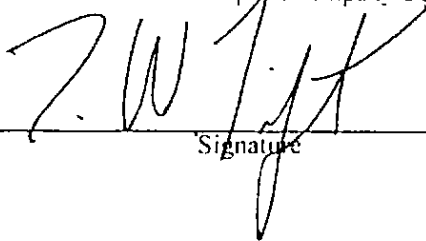
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes. (copy 605.0707 on back cover letter).

The purpose of this company was to
engage solely in the ownership, operation & management
of real estate property known as University Professional
Center, Tampa, FL, which was sold in 2017.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Thomas Tift
3280 Howell Hill Rd, Suite 100
Atlanta, Ga 30327

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:


Signature

Thomas W Tift
Printed Name

FILING FEE: \$25.00

FILED
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SECRETARY OF STATE
TALLAHASSEE, FL