L04,000022167

(Requ	iestor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				

000057525710

07/20/05--01020--004 ****30**00

PIL LU

2005 JUL 20 PM 1: 57

2005 JUL 20 PM 1: 57

Office Use Only

& BRYAN JUL 2 5 2005

TRANSMITTAL LETTER

TO:

Registration Section
Division of Corporations

Tallahassee, Florida 32399

SUBJECT: Crestview Park GP, 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: Kenneth K. Thompson, P.A. (Name of Person) (Firm/Company) 1150 Lee Boulevard, Suite 1A (Address) Lehigh Acres, Florid 33936 (City/State and Zip Code) For further information concerning this matter, please call: Esmeralda Serrata (Name of Person) Enclosed is a check for the following amount: 3 \$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) STREET ADDRESS: Registration Section Division of Corporations 499 E. Gaines Street P.O. Box 6327 Pol. Box 6327 MAILING ADDRESS: Registration Section Division of Corporations Poly E. Gaines Street P.O. Box 6327 Pol. Box 6327 MAILING ADDRESS: Registration Section Division of Corporations Poly E. Gaines Street P.O. Box 6327		-		
(Firm/Company) 1150 Lee Boulevard, Suite 1A (Address) Lehigh Acres, Florid 33936 (City/State and Zip Code) For further information concerning this matter, please call: Esmeralda Serrata at 239 657-3649 (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: 3 \$25.00 Filing Fee \$ \$30.00 Filing Fee & Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) STREET ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations	SUBJECT: Cres	stview Park GP, LLC		
(Firm/Company) 1150 Lee Boulevard, Suite 1A (Address) Lehigh Acres, Florid 33936 (City/State and Zip Code) For further information concerning this matter, please call: Esmeralda Serrata at 239 657-3649 (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: 3 \$25.00 Filing Fee \$ \$30.00 Filing Fee & Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) STREET ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations	·	(Name of L	imited Liability Company)	The second second
(Firm/Company) 1150 Lee Boulevard, Suite 1A (Address) Lehigh Acres, Florid 33936 (City/State and Zip Code) For further information concerning this matter, please call: Esmeralda Serrata at 239 657-3649 (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: 3 \$25.00 Filing Fee \$ \$30.00 Filing Fee & Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) STREET ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations				
(Firm/Company) 1150 Lee Boulevard, Suite 1A (Address) Lehigh Acres, Florid 33936 (City/State and Zip Code) For further information concerning this matter, please call: Esmeralda Serrata at 239 657-3649 (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: 3 \$25.00 Filing Fee \$ \$30.00 Filing Fee & Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) STREET ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations	The enclosed Articles	of Dissolution and fee(s) are sub-	mitted for filing.	長 20
(Firm/Company) 1150 Lee Boulevard, Suite 1A (Address) Lehigh Acres, Florid 33936 (City/State and Zip Code) For further information concerning this matter, please call: Esmeralda Serrata at 239 657-3649 (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: 3 \$25.00 Filing Fee \$ \$30.00 Filing Fee & Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) STREET ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations	Diagon			SS
(Firm/Company) 1150 Lee Boulevard, Suite 1A (Address) Lehigh Acres, Florid 33936 (City/State and Zip Code) For further information concerning this matter, please call: Esmeralda Serrata at 239 657-3649 (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: 3 \$25.00 Filing Fee \$ \$30.00 Filing Fee & Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) STREET ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations	riease return all corre	spondence concerning this matter	to the following:	
(Firm/Company) 1150 Lee Boulevard, Suite 1A (Address) Lehigh Acres, Florid 33936 (City/State and Zip Code) For further information concerning this matter, please call: Esmeralda Serrata at 239 657-3649 (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: 3 \$25.00 Filing Fee \$ \$30.00 Filing Fee & Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) STREET ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations				62
(Firm/Company) 1150 Lee Boulevard, Suite 1A (Address) Lehigh Acres, Florid 33936 (City/State and Zip Code) For further information concerning this matter, please call: Esmeralda Serrata at 239 657-3649 (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: 3 \$25.00 Filing Fee \$ \$30.00 Filing Fee & Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) STREET ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations		Kenneth K. Thompson	. P.A.	30 5
ILehigh Acres, Florid 33936 (City/State and Zip Code) For further information concerning this matter, please call: Esmeralda Serrata at (239 657-3649 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: 325.00 Filing Fee	_			Pr
ILehigh Acres, Florid 33936 (City/State and Zip Code) For further information concerning this matter, please call: Esmeralda Serrata at (239 657-3649 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: 325.00 Filing Fee				
ILehigh Acres, Florid 33936 (City/State and Zip Code) For further information concerning this matter, please call: Esmeralda Serrata at (239 657-3649 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: 325.00 Filing Fee				
Lehigh Acres, Florid 33936 (City/State and Zip Code) For further information concerning this matter, please call: Esmeralda Serrata	- "		(Firm/Company)	
Lehigh Acres, Florid 33936 (City/State and Zip Code) For further information concerning this matter, please call: Esmeralda Serrata				
Lehigh Acres, Florid 33936 (City/State and Zip Code)		1150 Lee Boulevard,	·····	
City/State and Zip Code			(Address)	
City/State and Zip Code				
For further information concerning this matter, please call:				
Esmeralda Serrata (Name of Person) Enclosed is a check for the following amount: \$\Begin{array}{cccccccccccccccccccccccccccccccccccc		(Ch)	y/State and Zip Code)	
Esmeralda Serrata (Name of Person) Enclosed is a check for the following amount: \$\Begin{array}{cccccccccccccccccccccccccccccccccccc				
Esmeralda Serrata (Name of Person) Enclosed is a check for the following amount: \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	For further information	n concerning this matter, please c	all:	
(Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: \$25.00 Filing Fee				
(Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: \$25.00 Filing Fee	Feme	oralda Sorrata	at / 239 657-3649	
\$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) STREET ADDRESS: Registration Section Division of Corporations Certified Copy (additional copy is enclosed) MAILING ADDRESS: Registration Section Division of Corporations				Telephone Number)
\$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) STREET ADDRESS: Registration Section Division of Corporations Certified Copy (additional copy is enclosed) MAILING ADDRESS: Registration Section Division of Corporations				
\$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) STREET ADDRESS: Registration Section Division of Corporations Certified Copy (additional copy is enclosed) MAILING ADDRESS: Registration Section Division of Corporations				
Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) STREET ADDRESS: Registration Section Division of Corporations Certified Copy (additional copy is enclosed) Registration Section Division of Corporations	Enclosed is a check for t	he following amount:		
(additional copy is enclosed) Certified Copy (additional copy is enclosed) STREET ADDRESS: Registration Section Division of Corporations Certified Copy (additional copy is enclosed) MAILING ADDRESS: Registration Section Division of Corporations	☐ \$25.00 Filing Fee		•	<u> </u>
STREET ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations		Certificate of Status	• • • • • • • • • • • • • • • • • • • •	
Registration Section Registration Section Division of Corporations Division of Corporations				(additional copy is enclosed)
Registration Section Registration Section Division of Corporations Division of Corporations				
Division of Corporations Division of Corporations				
			P.O. Box 6327	ILLOIIS

Tallahassee, Florida 32314

ARTICLES OF DISSOLUTION **FOR** A FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF D FOR	4: O C
. The name of the limited liability company is	
Crestview Park GP, LLC	T. E.
. The date the dissolution was approved:July	18, 2005
. A description of the occurrence that resulted in the section 608.441, Florida Statutes, (copy of 608.441	
CHECK ONE: All debts, obligations and liabilities of the limited 1-OR- Adequate provision has been made for the debts, of the limited 1 respective rights and interests. CHECK ONE: There are no suits pending against the company in -OR- Adequate provision has been made for the satisfact be entered against it in any pending suit. Signatures of the members having the same percentage dissolution:	bligations and liabilities pursuant to s. 608.4421. Douted among its members in accordance with their any court. Ition of any judgment, order or decree which may

Filing Fee: \$25.00