

Jun. 29. 2010 10:50AM

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Americas Capital Partners
Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : AMERICAS CAPITAL PARTNERS
Account Number : I20070000108
Phone : (305) 995-9998
Fax Number : (305) 995-9993

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**LLC DISSOLUTION OR WITHDRAWAL
ACP ATLANTA FLEX I MANAGER LLC**

Certificate of Status	0
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TALLAHASSEE, FLORIDA

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A. LUNT

Help JUN 30 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ACP ATLANTA FLEX I MANAGER 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:

NANCY HILL

(Name of Person)

AMERICA'S CAPITAL PARTNERS

(Firm/Company)

444 BRICKELL AVENUE, STE. 900

(Address)

MIAMI, FL 33131

(City/State and Zip Code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

NANCY HILL

(Name of Person)

at (305) 995.9998

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
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

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

1. The name of a limited liability company is

ACP ATLANTA FLEX I MANAGER LLC

2. The Articles of Organization were filed on AUGUST 4, 2006 and assigned document number _____

3. The date the dissolution was approved: JUNE 1, 2010

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

CESSATION OF OPERATIONS

5. CHECK ONE:

☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.

-OR-

☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

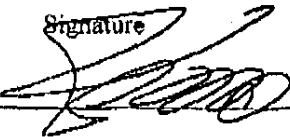
☒ There are no suits pending against the company in any court.

-OR-

☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature



Printed Name

ALLEN C. DE OLAZARRA

FILING FEE: \$25.00

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TALLAHASSEE-FLORIDA