

L07000123828

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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)



PICK-UP



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MAIL

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(Business Entity Name)

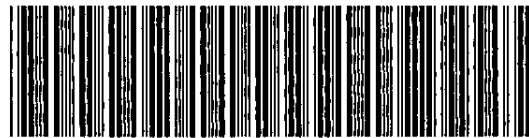
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TALLAHASSEE, FLORIDA

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SW ORLANDO CONDOS 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:

ELISABETH ALONSO

(Name of Person)

MCKINLEY INC.

(Firm/Company)

320 N MAIN STREET, SUITE 200

(Address)

ANN ARBOR, MI 481014

(City/State and Zip Code)

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For further information concerning this matter, please call:

ELISABETH ALONSO

(Name of Person)

at ( 734 ) 769-8520

(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

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

1. The name of a limited liability company is  
**SW ORLANDO CONDOS LLC**

2. The Articles of Organization were filed on **DECEMBER 13, 2007** and assigned document number  
**L07000123828**

3. The date the dissolution was approved: **JUNE 11, 2012**

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).

**BUSINESS ACTIVITY SOLD**

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

**RONALD N. WEISER**

**Albert M. Berriz, POA**

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### **DURABLE POWER OF ATTORNEY**

KNOW ALL MEN BY THESE PRESENTS, that I, Ronald N. Weiser, of Ann Arbor, Michigan, by these presents do make, constitute and appoint Albert M. Berriz, Marc A. Weiser or C. Wendell Dunbar as my true and lawful attorney-in-fact for me and in my name, place and stead, to have and exercise complete and absolute discretion, dominion and control over all of my estate, whether real or personal, tangible or intangible, including, without limitation, the power to:

1. Ask, demand, sue for, recover and receive all manner of goods, chattels, debts, rents, interest, sums of money and demands whatsoever, due or hereafter to become due and owing or belonging to me, and to make, give and execute acquittances, receipts, releases, satisfactions or other discharges for the same, whether under seal or otherwise.
2. Enter into and take possession of any lands, real estate, tenements, houses, stores or buildings or parts thereof belonging to me that may become vacant or unoccupied, or to the possession of which I may be or may become entitled, and to receive and take for me and in my name and to my use all or any rents, profits or issues of any real estate to me belonging, and to let the same, and from time to time to renew leases.
3. Make, execute, endorse, accept and deliver in my name or in the name of my said attorney, all checks, notes, drafts, bills of exchange, warrants, acknowledgments, agreements, orders and all other instruments in writing, of whatsoever nature, whether funds are actually credited to the account against which funds are drawn or such acts are in anticipation of deposits to be made or funds to be credited.
4. Execute, acknowledge and deliver any and all contracts, deeds, leases, assignments of mortgage, extensions of mortgage, satisfactions of mortgage, releases of mortgage, subordination agreements, options, puts, calls and any other instrument or agreement of any kind or nature whatsoever in connection therewith, and affecting any and all property presently mine or hereafter acquired, located anywhere.
5. Commence and prosecute on my behalf any suits or actions or other legal or equitable proceedings for the recovery of any of my lands, or for any goods, chattels, debts, duties, demand, cause or thing whatsoever due or to become due or belonging to me, and to prosecute, maintain and discontinue the same.
6. Appear, answer and defend in all actions and suits whatsoever which shall be commenced against me and also for me and in my name to compromise, settle and adjust, with each and

every person or persons, all actions, accounts, dues and demands, subsisting or to subsist between me and them or any of them, hereby giving to my said attorney power and authority to do, execute and perform and finish for me and in my name all those things which shall be expedient and necessary, or which my said attorney shall judge expedient and necessary in and about or concerning the premises, or any of them, as fully as I could do if personally present, hereby ratifying and confirming whatever my said attorney shall do or cause to be done in, about or concerning the premises, and any part thereof.

7. Establish, assign, transfer or terminate any account with a bank, mortgagee, savings and loan association, broker or other investment institution and to make deposits or other additions thereto and to withdraw all or any amounts therefrom (even though by so doing an overdraft or a loan or a call on the undersigned is thereby created), which accounts shall include, without limitation, one or more margin accounts. Have access to any safe deposit box of which I am a tenant or co-tenant with full power to withdraw or change from time to time the contents thereof and to exchange or surrender the box and keys thereto, renew any rental contract therefor and to do all things which any depository, association or bank or its agents may require, hereby releasing the lessor from all liability in connection therewith. Invest and reinvest in loans, stocks, bonds, including United States bonds, securities, real estate, life insurance, annuities or endowment policies or combinations thereof or in any other investment which my attorney-in-fact may deem proper.
8. Collect any pension annuity, or similar retirement benefits to which I am or may become entitled, and make any and all elections with regard to the form, manner, and timing of payments as may be advisable, in my attorney's sole discretion, including benefits payable to or for my benefit by any governmental agency or body (such as Supplemental Social Security (SSI), Medicaid, Medicare, and Social Security Disability Insurance (SSDI), and for the purposes of receiving Social Security benefits, my attorney-in-fact is herewith appointed my "Representative Payee"), utilize all lawful means and methods to recover such assets and/or rights, qualify me for such benefits and claim such benefits on my behalf and compromise and grant discharges in regard to the matters described herein.
9. Take all steps and remedies necessary and proper for the conduct and management of my business affairs, and for the recovery, receiving, obtaining and holding possession of any lands, tenements, rents or real estate, goods and chattels, debts, interest, demands, duties, sum or sums of money or any other thing whatsoever, located anywhere, that are or shall be by my said attorney-in-fact thought to be due, owing, belonging to or payable to me in my own right or otherwise. Exercise my voting rights in any business enterprise as a shareholder, member, partner or otherwise and receive dividends and distributions from such interests and sell, assign or transfer the same.
10. Exercise all authority that I might possess as Trustee or attorney or under any power of appointment which I now hold or which may hereafter be granted to me, including any powers to assign or transfer property by gift or otherwise and appoint agents and attorneys-in-fact to exercise all powers granted hereunder.

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11. Transfer any asset of mine to any Revocable Trust of which I am settlor and accept on my behalf all accountings or other reports of any fiduciary.
12. Make gifts consistent with my estate plan and continue any annual gifts which I have established a pattern of making, whether to charity or to individuals including the person acting under this power of attorney.
13. File any tax returns required, pay taxes, interest and penalties, and represent me in all tax matters before the Internal Revenue Service and state and local taxing authorities in any and all courts or administrative hearings, enter into settlements, consents and other agreements with taxing authorities and engage or discharge attorneys, accountants and other advisors for such representation.
14. Disclaim any asset of which I become the designated recipient.
15. Distribute, upon my admission to a hospital, medical or other treatment center or clinic, nursing home, mental institution or hospice, my personal effects pursuant to the directions in my Will or in any memoranda prepared in conjunction with my Will.
16. Employ and compensate agents, accountants, attorneys, real estate brokers and other professionals and retain and compensate such persons for services rendered.
17. Purchase, maintain, borrow against, pursue claims upon, surrender, collect or cancel (a) life insurance or annuities of any kind on my life or the life of any one in whom I have an insurable interest, (b) liability insurance protecting me and my estate against third party claims, (c) hospital insurance, medical insurance, Medicare supplement insurance, custodial care insurance and disability income insurance for me or any of my dependents, and (d) casualty insurance insuring assets of mine against loss or damage due to fire, theft, or other commonly insured risk. The foregoing powers shall apply to private and public plans, including, but not limited to, Medicare, Medicaid, SSI and Worker's Compensation.
18. Borrow, from time to time, such sums of money and upon such terms as my attorney-in-fact may think expedient for or in relation to any purpose or object which my attorney-in-fact may deem proper or expedient, unsecured or upon the security of any of my property, whether real or personal or otherwise, and for such purpose, give, execute in my name, deliver and acknowledge promissory notes and/or renewals thereof, mortgages, pledges and guaranties with such powers and provisions as my attorney-in-fact may think proper or necessary.
19. Open, read, respond to, and redirect my mail; represent me before the U.S. Postal Service in all matters relating to mail service; establish, cancel, continue or initiate my membership in organizations and associations of all kinds; take and give or deny custody of all of my important documents, including, but not limited to, my will, codicils, trust agreements, deeds, leases, life insurance policies, contracts and securities and disclose or refuse to disclose such documents;

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U.S. DEPARTMENT OF STATE  
WASHINGTON, D.C. 20520

obtain and release or deny information or records of all kinds relating to me, any interest of mine or to any person for whom I am responsible; house or provide for housing, support and maintenance of any animals or other living creatures that I may own and contract for and pay the expenses of their proper veterinary care and treatment, and if the care and maintenance of such animals or other living creatures shall become unreasonably expensive or burdensome in my attorney-in-fact's opinion, irrevocably transfer such animals to some person or persons willing to care for and maintain them.

20. Act as successor custodian of any account established pursuant to the Uniform Transfer to Minors Act of which I am custodian and as successor donor of any Qualified Tuition Program of which I am donor, unless I have effectively designated otherwise.

21 My attorney-in fact (except as specifically authorized in this instrument):

a. shall have no power or authority whatsoever with respect to:

- i. any interest in or incidents of ownership in any policy of insurance I may own on the life of my attorney-in-fact;
- ii. any irrevocable trust created by my attorney-in-fact as to which I am a trustee or a beneficiary; or
- iii. any asset given to me by my attorney-in-fact..

b. shall be prohibited from:

- i. appointing, assigning, or designating any of my assets, interests, or rights directly or indirectly to my attorney-in-fact, my attorney-in-fact's estate, my attorney-in-fact's creditors or the creditors of my attorney-in-fact's estate;
- ii. disclaiming assets to which I would otherwise be entitled if the effect of such disclaimer is to cause such assets to pass in any one calendar year directly or indirectly to my attorney-in-fact or his or her estate;
- iii. using my assets to discharge any of my attorney-in-fact's legal obligations, including any obligations of support which my attorney-in-fact may owe others (excluding those whom I am legally obligated to support);
- iv. executing a will or codicil on my behalf; and
- v. executing, amending, or revoking any trust of which I am settlor or co-settlor; however, my attorney-in-fact can enter into a custodial agreement with a bank or other institution with trust powers.

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This instrument is to be construed and interpreted as a general Durable Power of Attorney. The enumeration of specific items, rights, acts or powers herein is not intended to, nor does it limit or restrict, and is not to be construed or interpreted as limiting or restricting the general powers herein granted to said attorney-in-fact, giving and granting unto said attorney-in-fact full power and authority to do and perform all and every act and thing requisite and necessary to be performed, and to execute the powers herein expressly granted, as fully to all intents and purposes as I might or could do if personally present, hereby ratifying and confirming all that my said attorney-in-fact shall lawfully do or cause to be done by virtue hereof.

No attorney-in-fact named herein or substituted hereunder shall incur any liability to me for acting or refraining from acting hereunder, except for such attorney's own willful misconduct or gross negligence. This Durable Power of Attorney shall not be affected by my disability or incapacity, except as provided by statute, it being my intent that this Durable Power of Attorney shall be exercisable and continue in full force and effect notwithstanding any later mental or physical disability or incapacity of myself, and shall be valid until I die or revoke the power of attorney.

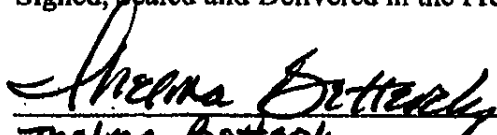
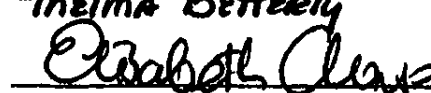
This general Durable Power of Attorney shall be construed and enforced pursuant to the laws of the State of Michigan. Any person dealing with my attorney-in-fact shall be entitled to rely upon this instrument and the representations of my attorney-in-fact as to the continuing authority hereunder until such person receives actual notice to the contrary.

I hereby revoke all prior powers of attorney, general and/or limited, heretofore granted by me as principal and terminate all agency relationships created thereunder, including those of all successor attorneys-in-fact named therein, if any, excepting: (1) Powers granted by me on forms provided by financial institutions granting the right to write checks on, deposit funds to and withdraw funds from accounts to which I am a signatory or granting access to a safe deposit shall not be revoked but shall continue in full force and effect. (2) Powers of attorney which authorize medical treatment, or the withdrawal or withholding of medical treatment.

IN WITNESS WHEREOF, I, Ronald N. Weiser, have hereunto set my hand and seal in the City of Ann Arbor, State of Michigan, this 19<sup>th</sup> day of August, 2002.

  
Ronald N. Weiser

Signed, Sealed and Delivered in the Presence of:

  
Thelma Betteely  
  
Elizabeth Alonso

Elizabeth Alonso

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STATE OF MICHIGAN )

COUNTY OF WASHTENAW )

) ss.

The foregoing instrument was acknowledged before me this 19<sup>th</sup> day of August, 2002 by Ronald N. Weiser.

Thelma Betterly  
Thelma Betterly, Notary Public  
Washtenaw County, Michigan  
My Commission Expires: Nov. 6, 2005

PREPARED BY FERGUSON & WIDMAYER, P.C.  
538 North Division  
Ann Arbor, Michigan 48104  
734-662-0222

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STATE OF MICHIGAN )

COUNTY OF WASHTENAW )

) ss.

The foregoing instrument was acknowledged before me this 19<sup>th</sup> day of August, 2002 by Eileen Lappin Weiser.

*Thelma Bettway*  
Thelma Bettway, Notary Public  
Washtenaw County, Michigan  
My Commission Expires: Nov. 4, 2005

PREPARED BY FERGUSON & WIDMAYER, P.C.  
538 North Division  
Ann Arbor, Michigan 48104  
734-662-0222

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