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10 APR 30 PM 3: 24
SECTION APR 30 PM 3: 24

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJE	CT: OCFP ART COMMUNITES, LLC (Name of Limited Liability Company)				
(Name of Limited Liability Company)					
	losed Articles of Dissolution and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:					
	ROHALD S. ROWE				
(Name of Person)					
	OCFP ART COYNUMITIES, LLC (Firm/Company)				
	(Firm/Company)				
	P.O. BOX 1238, PALMETTO, FL 34220				
	PALMENTO, FC 34220				
(City/State and Zip Code)					
For further information concerning this matter, please call:					
	RONALD S. ROWE 941 , 920-1591				
•	(Name of Person) at (941) 920-1591 (Area Code & Daytime Telephone Number)				
Enclosed i	s a check for the following amount:				
l	Filing Fee 30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) (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

FILED

10 APR 30 PM 3: 24

1. The name of a limited liability company i	is	30000 x 500 mm
OCFP AZT	COMMUNITIES,	SECRETARY OF STATES
2. The Articles of Organization were filed on \(\triangle 08000 G3528 \)	6-30-2008	and assigned document numbe
3. The date the dissolution was approved:	3-1-2010	 •
4. A description of occurrence that resulted in 608.441, Florida Statutes, (copy 608.441 or	the limited liability compan back cover letter).	y's dissolution pursuant to section
A MOTION TO DISSOLU	K WAS APPROKED	BY THE MEHBERS.
All remaining property and assets have been rights and interests. CHECK ONE: There are no suits pending against to OR-	for the debts, obligations and distributed among its members in any court.	d liabilities pursuant to s. 608.4421.
natures of the members having the same percer	ntage of membership interest	s necessary to approve the dissolution:
Signature PUS. R	_ Ro~	Printed Name (ACD S. Rowe.
alo Patricia Bol		LE PATRICK BOLING
,,		
A		

FILING FEE: \$25.00