Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000023 Phone

: (850)222-1092

Fax Number

: (850)878-5368

LLC DISSOLUTION OR WITHDRAWAL BV SPRINGPORT GLEN, LLC

| Certificate of Status | 0 |
|-----------------------|---------|
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COVER LETTER

| TO: | | ution Section n of Corporations | | |
|---------------|----------------------------------|--|---|---|
| Subj | ECT: | | / Springport Glen, LLC | |
| | _ | (Name of Li | imited Liability Company) | |
| The c | nclosed Ar | nicles of Dissolution and fee(s) are sub | united for filing. | |
| Please | return all | correspondence concerning this matter | r to the following: | |
| | | Lynn Almeida | | |
| | | (| (Name of Person) | |
| | | BV S | pringpart Glen, LLC | |
| | (Firm/Company) | | | |
| | 1661 Worthington Road, Suite 100 | | | |
| | (Address) | | | |
| | | West Palm Beach, FL 33409 | | |
| | | (Cit) | /State and Zip Code) | |
| Por fl | uther infor | mation concerning this matter, please o | call: | |
| | Lynn A | Almeida | st () | |
| | | (Name of Person) | (Area Code & Daytims | Telephone Number) |
| Enclos | ed is a chec | k for the following amount: | | |
| p 52 5 | .00 Filing F | ρ \$30.00 Filing Fee & Certificate of Status | p \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | p \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | | MAII INC ADDDRES | STDEFT/CALL | OTED ADDRESS. |

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

FILED

13 NOV 18 AM II: 07

SCURLIAN OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| The name of a limited liability company is BV Springport Glen, LLC | <u></u> |
|---|--|
| 2. The Articles of Organization were filed on 02/26/ L10000022068 | 2010 and assigned document number |
| 3. The date the dissolution was approved: November | r 11, 2013 |
| | mited liability company's dissolution pursuant to section |
| Written consent of the sole member | |
| | |
| 5. CHECK ONE: | |
| | ne limited liability company have been paid or discharged. |
| OR- Adequate provision has been made for the | he debts, obligations and liabilities pursuant to s. 608.4421. |
| All remaining property and assets have been dist rights and interests. | ributed among its members in accordance with their respecti- |
| 7. CHECK ONE: | |
| ☑ There are no suits pending against the co | ompany in any court. |
| OR- Adequate provision has been made for the entered against it in any pending suit. | he satisfaction of any judgment, order or decree which may b |
| gnatures of the members having the same percentage | e of membership interests necessary to approve the dissolution |
| Signature | Printed Name |
| | Blue Valley Apartments, Inc. |
| | Do Possid W Pada |
| 1 Chr | By: Ronald M. Farls President and Chie: Executive Officer |
| | |
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