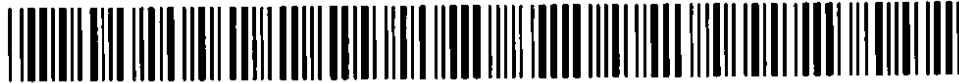


L12000087291

Florida Department of State
Division of Corporations
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((H22000123731 3)))



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

From:

Account Name : NELSON MULLINS RILEY & SCARBOROUGH LLP OF BOCA RATON
Account Number : 076376001555
Phone : (803)255-9617
Fax Number : (561)483-7321

**LLC DISSOLUTION OR WITHDRAWAL
ALTIS AT PEMBROKE PINES MANAGER, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
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**ARTICLES OF DISSOLUTION
OF
ALTIS AT PEMBROKE PINES MANAGER, LLC
(Document No. L12000087291)**

Pursuant to the applicable provisions of Chapter 605, Florida Statutes, the undersigned limited liability company submits the following Articles of Dissolution:

- FIRST: The name of the limited liability company is: Altis at Pembroke Pines Manager, LLC.
- SECOND: The effective date of the limited liability company's dissolution shall be the date of filing of these Articles of Dissolution.
- THIRD: The requisite members of the limited liability company consented in writing to dissolve the limited liability company.
- FOURTH: To the extent that the limited liability company has property and assets, such property and assets have been distributed to its members in accordance with their respective rights and interests.
- FIFTH: The manager of the limited liability company shall wind up the limited liability company's activities and affairs.

Signed effective as of April 5, 2022.

MANAGER:

ALTMAN PEMBROKE MANAGER, LLC,
a Florida limited liability company,
its Manager

By: 

Timothy A. Peterson, CEO

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TALLAHASSEE, FLORIDA

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**NOTICE OF DISSOLUTION
FOR
ALTIS AT PEMBROKE PINES MANAGER, LLC**

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

Name of Limited Liability Company: Altis at Pembroke Pines Manager, LLC

Document No. of Limited Liability Company: L12000087291

Date of dissolution: The date of filing of the Certificate of Dissolution with the Department of State.

Description of information that must be included in a claim:

1. Full legal name, address and telephone number of claimant; and
2. Complete description, date and amount of claim.

Mailing address where claims can be sent:

Altis at Pembroke Pines Manager, LLC
201 E. Las Olas Boulevard, Suite 1900
Fort Lauderdale, FL 33301

A claim against the above-named corporation will be barred unless a proceeding to enforce the claim is commenced within four years after the filing of this notice.

Signed this 5th day of April, 2022.

ALTIS AT PEMBROKE PINES MANAGER, LLC,
a Florida limited partnership

By: ALTMAN PEMBROKE MANAGER, LLC,
a Florida limited liability company,
its Manager

By: 
Timothy A. Peterson, CFO

Fax Audit Number: H22000123731 3