

NO 7000003863

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6380

9555727

From: Account Name : C T CORPORATION SYSTEM
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Phone : (850) 205-8842
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DISSOLUTION OR WITHDRAWAL LEGACY AT TAMPA CONDOMINIUM ASSOCIATION, INC.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$43.75

RECEIVED

15 MAY 19 PM 2:06

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
15 MAY 18 AM 10:22

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05/19/15

May 19, 2015

FLORIDA DEPARTMENT OF STATE

Division of Corporations

LEGACY AT TAMPA CONDOMINIUM ASSOCIATION, INC.
307 S. WILLOW AVE
SUITE 100
TAMPA, FL 33606

SUBJECT: LEGACY AT TAMPA CONDOMINIUM ASSOCIATION, INC.
REF: N07000003863

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The document must be adopted in one of the following manners:

- If the corporation has members entitled to vote:
 - (1) the date of the meeting of members at which the resolution to dissolve was adopted.
 - (2) a statement that the number of votes cast for dissolution was sufficient for approval, OR
 - (3) a statement that a resolution was adopted by written consent of the members and executed in accordance with section 617.0701, Florida Statutes.

- If the corporation has no members or members entitled to vote:
 - (1) a statement that the corporation has no members or members entitled to vote on the dissolution.
 - (2) the date of adoption of the resolution by the board of directors.
 - (3) the number of directors then in office and the vote for the resolution.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell
Regulatory Specialist III

FAX Aud. #: R15000120578
Letter Number: 815A00010434

PLEASE GIVE ORIGINAL SUBMISSION DATE AS FILE DATE
05/19/15

P.O BOX 6327 - Tallahassee, Florida 32314

PLEASE GIVE ORIGINAL SUBMISSION DATE AS FILE DATE
05/19/15

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Legacy at Tampa Condominium Association Inc.

DOCUMENT NUMBER: N07000003863

The enclosed Articles of Dissolution and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Dawkins

(Name of Contact Person)

Baker Donelson

(Firm/Company)

200 South Orange Ave., Suite 2900

(Address)

Orlando, Florida 32801

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Dawkins

(Name of Contact Person)

at **407**

(Area Code)

367.5441

(Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$35 Filing Fee
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
- \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State: Legacy at Tampa Condominium Association, Inc.

SECOND: The document number of the corporation (if known): N07000003863

THIRD: Adoption of Dissolution (COMPLETE SECTION I OR II)

SECTION I

If the corporation has members entitled to vote:

(CHECK/COMPLETE ONE)

The date of meeting of members at which the resolution to dissolve was adopted

_____. The number of votes cast by the members was sufficient for approval.

The resolution was adopted by written consent of the members and executed in accordance with section 617.0701, Florida Statutes.

SECTION II

If the corporation has no members or members entitled to vote on the dissolution:

The corporation has no members or members entitled to vote on the dissolution.

The date of adoption of the resolution by the board of directors was April 30, 2015.

The number of directors in office was 3 and the vote for resolution was 3 for and None (0) against. (Must be a majority vote)

FOURTH Effective date of dissolution, if applicable: Date Articles of Dissolution are filed
(no more than 90 days after dissolution file date)

Signature: _____

(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

Santosh Govindaraju

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35

FILED
15 MAY 18 AM 10:22
TAMPA FLORIDA

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 617.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: Legacy at Tampa Condominium Association, Inc.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

Description of information that must be included in a claim:

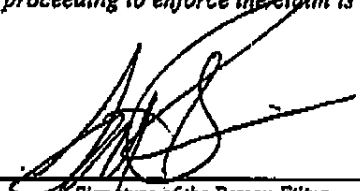
Name of claimant, nature of claim, amount of claim and date claim arose.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

C/O Convergent Management LLC
4600 West Cypress Street, Suite 120
Tampa, Florida 33607
Attn: Michelle Dy

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Santosh Govindaraju, President
Printed Name of the Person Filing


Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00

**PLAN OF DISTRIBUTION OF ASSETS OF
LEGACY AT TAMPA CONDOMINIUM ASSOCIATION, INC.**

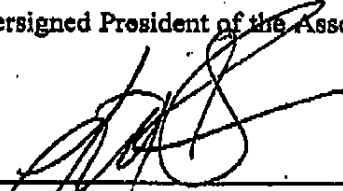
This instrument sets forth the Plan of Distribution of the assets ("Plan of Distribution") of Legacy at Tampa Condominium Association, Inc., a Florida not-for-profit corporation (the "Association"), pursuant to subsections (2) & (3) of Section 617.1406, Florida Statutes.

1. All Liabilities Paid. All liabilities and obligations of the Association have been paid and discharged.

2. No Remaining Assets. There are no remaining assets of the Association, and no assets of the Association were distributed to any Member, Director, Officer, or employee of the Association.

3. Authentication of Plan of Distribution. This Plan of Distribution was adopted on April 30, 2015, by all of the directors of the Association by written action in lieu of a meeting and complies with the requirements of Section 617.1406(2), Florida Statutes.

IN WITNESS WHEREOF, the undersigned President of the Association has executed this Plan of Distribution.



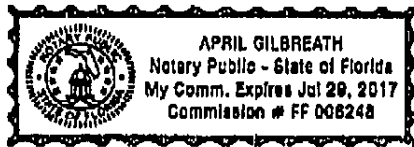
Santosh Govindaraju, President


STATE OF FLORIDA

COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 30th day of April, 2015, by Santosh Govindaraju, President of Legacy at Tampa Condominium Association, Inc., a Florida not-for-profit corporation. Said person is personally known to me or produced as identification.

AFFIX NOTARY STAMP OR SEAL:





Notary Public Signature on Above Line
Printed Name: April Gilbreath
Notary Public, State of _____
My commission expires: _____