## 203000108061

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(Cit	y/State/Zip/Phon	ne #)
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06/04/10--01007--010 \*\*35.00

JUN - 8 2010

## **COVER LETTER**

TO: Amendment Section

Division of Corporations	
SUBJECT: LOWFL	AT MARBELLA II, INC
DOCUMENT NUMBER:	000108061
The enclosed Articles of Dissolution and fe	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
LOWELL	BAY VIEW CENTRE
80 S.WF 8典 MIAMI, FLC	/STm Suite 1870 PRIDA 33130
(Ad	dress)
(City/State	e and Zip Code)
For further information concerning this matter	er, please call:
(Name of Contact Person)	at (305) 577-8550 X24 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amoun	t:
\$35 Filing Fee \$\bigs\tag{\text{\$43.75 Filing Fee & \$\bigs\tag{\text{Certificate of Status}}}	\$43.75 Filing Fee & \$\Bigsquare\tag{\text{\$52.50 Filing Fee,}}\$  Certified Copy Certificate of Status & Certified Copy (Additional copy is enclosed)  (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 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:				
	LOWELL AT MARBELLA II, INC.				
SECOND:	The document number of the corporation (if known): POBOO/08 06/	/ -			
THIRD:	The date dissolution was authorized: 5/3/2010	-			
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date)				
FOURTH:	Adoption of Dissolution (CHECK ONE)				
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.	n			
	Dissolution was approved by the shareholders through voting groups.				
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:				
	The number of votes cast for dissolution was sufficient for approval by	η			
	ARY OF STATE SSEE, FLORID	n J			
	Signature:  (By a director/president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)				
	(Typed or printed name of person signing)				
	Direct Tole (Title of person signing)				

Filing Fee: \$35