P91000090856

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: PARK RICHEY APARTMEN		
DOCUMENT NUMBER: P97000096	856	
The enclosed Articles of Dissolution a	and fee are submitted for filir	ıg.
Please return all correspondence conce	rning this matter to the follow	wing:
THOMAS N. TOMPKINS		
(Nam	e of Contact Person)	
PARK RICHEY APARTMENTS, INC.		
	(Firm/Company)	
PO BOX 450086		
	(Address)	
KISSIMMEE, FLORIDA 34745		
(City	y/State and Zip Code)	_
For further information concerning this	s matter, please call:	
THOMAS N. TOMPKINS	at ((407) 870-2450	
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following a	mount:	
□ \$35 Filing Fee □ \$43.75 Filing Fee Certificate of Stat		□ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:	STR	EET ADDRESS:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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: PARK RICHEY APARTMENTS, INC.				
SECOND:	The document number of the corporation (if known):				
THIRD:	The date dissolution was authorized:				
	Effective date of dissolution if applicable:				
	(no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.				
FOURTH:	Adoption of Dissolution (CHECK ONE)				
	 Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval. 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 				
					<u>≯</u> ° ≥
					(voting group)
		THOMAS N. TOMPKINS			
		(Typed or printed name of person signing)			
	PRESIDENT				
	(Title of person signing)				

Filing Fee: \$35

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. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. Name of Corporation: PARK RICHEY APARTMENTS, 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: All claims must include date, time, location and detailed description of any claim along with any costs associated with claim. Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) Post Office Box 450086, Kissimmee, Florida 34745 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. THOMAS N. TOMPKINS

Printed Name of the Person Filing