

A07000000850

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

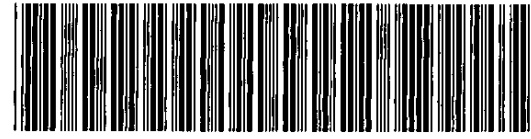
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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01/22/08--01008--020 \*\*105.00

SECRETARY  
DIVISION OF  
08 JAN 23 AM 11:46

G. MCLEOD  
JAN 24 2008  
EXAMINER

**UG PROPERTIES, LLC**

**120 HOWARD STREET, SUITE 450, SAN FRANCISCO CA 94105  
TEL: 415-707-7000  
FAX: 415-707-7009**

January 18, 2008

Registration Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

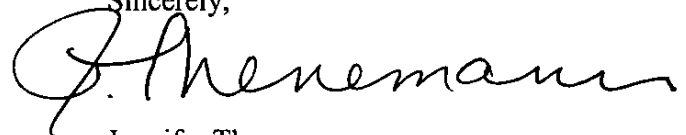
Re: UG Gator, LP

Dear Sir or Madam:

Enclosed are two (2) original signed Certificate of Dissolution forms for the cancellation of the above listed limited partnership. Also enclosed is a return envelope for copies of the certified form to be returned to our office for our records.

Please contact the undersigned should you have any questions.

Sincerely,



Jennifer Thenemann

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** UG Gator, LP

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Jennifer Thenemann

(Contact Person)

UG Properties, LLC

(Firm/Company)

120 Howard Street, Suite 450

(Address)

San Francisco, CA 94105

(City, State and Zip Code)

For further information concerning this matter, please call:

Jennifer

(Name of Contact Person)

at ( 415 ) 707-7000

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

\$52.50 Filing Fee

\$61.25 Filing Fee  
and Certificate of  
Status

\$105.00 Filing Fee  
and Certified Copy

\$113.75 Filing Fee,  
Certified Copy, and  
Certificate of Status

**STREET ADDRESS:**

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

**MAILING ADDRESS:**

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

**CERTIFICATE OF DISSOLUTION  
FOR**

**UG Gator, LP**

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

Pursuant to the provisions of section 620.1203, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on July 3, 2007, hereby submits this Certificate of Dissolution.

**FIRST:** Reason for dissolution: (State why partnership is submitting dissolution)

Written consent of the general partner and a majority

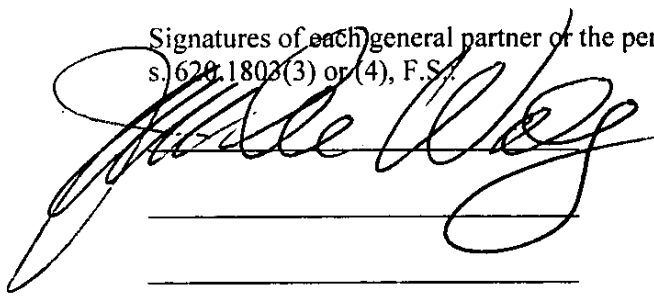
in interest of the limited partners was obtained

**SECOND:**  A Notice of Dissolution is attached.  
(Check box if attached.)

**THIRD:** Effective date, if other than the date of filing: \_\_\_\_\_

*(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)*

Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.



**Filing Fee:** \$52.50  
**Certified Copy (optional):** \$52.50  
**Certificate of Status (optional):** \$8.75

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS