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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : BUCHANAN INGERSOLL PROFESSIONAL CORPORATION
Account Number : I20030000049
Phone : (305) 347-4087
Fax Number : (305) 347-4089

**LLC DISSOLUTION OR WITHDRAWAL
SNBS FLORIDA HOLDINGS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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TALLAHASSEE FLORIDA

14 SEP 16 AM 7:48

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Sep. 16. 2014 12:24PM Buchanan Ingersoll & Rooney LLP

No. 6683 P. 2
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SNBS Florida Holdings LLC
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

David A. Pearl, Esq.
(Name of Person)

Buchanan Ingersoll & Rooney PC
(Firm/Company)

401 E. Las Olas Blvd., Suite 2250
(Address)

Ft. Lauderdale, FL 33301
(City/State and Zip Code)

For further information concerning this matter, please call:

David A. Pearl at (954) 468-2306
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

\$55.00 Filing Fee, Certificate of Dissolution &
Certified Copy (additional copy is enclosed)

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

SNBS Florida Holdings LLC

2. The Articles of Organization were filed on February 14, 2013 and assigned

document number L23000023849

3. The delayed effective date the dissolution is not effective on the date of filing.
(effective date cannot be prior to 90 days prior to filing and no later than 90 days after date documents received in filing)

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

The sole member, Slovane National Benefit Society,
consents to the dissolution of the company

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs:

6. Signature of an authorized person or if there are no members, the signature of the person appointed and
listed above to wind up the company's activities and affairs:

Joseph C. Evansh
Signature

Joseph C. Evansh
Printed Name

FILED FEB 26 2013

President, Slovane National
Benefit Society,
Sole Member