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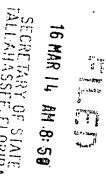
(Re	equestor's Name)	·
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MAR 15 2016 J SHIVERS

COVER LETTER

Division of Corporations		
SUBJECT: THE RUBIN FAMILY TRUST II 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:		
the same and the s		
MERRILL RUBIN (Name of Person)		
(Name of Person)		
(Firm/Company)		
11230 PARADISE POINTE WAY (Address)		
NEW PORT RICHEY, FLORIDA 34654		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
MERRILL RUBIN at (727) 494-7205 (Name of Person) (Area Code & Daytime Telephone Number)		
(Name of Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$25.00 Filing Fee and 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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is	
	THE RUBIN FAMILY TRUST II LLC	
2.	The Articles of Organization were filed on $01/15/2014$ and assigned	
	document number <u>L</u> 1400000 7767	
3.	The delayed effective date the dissolution if not effective on the date of filing: 13.07/2016 (effective date cannot be prior to or more than 90 days later than date document is received for filing) 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.	
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 CORPORATION WAS SETUP TO PURCHASE PROPERTY.	
	PROPERTY WAS SOLD, THEREFORE CORPORATION IS NO LONGER NEEDED.	
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. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:	
	Merrice Rubin Signature MERRILL RUBIN Printed Name	
	Signature Printed Name	

FILING FEE: \$25.00