## Florida Department of State

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Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

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Fax Number : (850)878-5368

## DISS/TERM/CANCEL/REV OF LP/LLP\_\_\_ SPANISH TRACE HOUSING II, LTD.

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 03      |
| Estimated Charge      | \$52.50 |

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AUG 1 9 2013

T. HAMPTON

## COVER LETTER

| TO:   | Registration S<br>Division of Co   |  |        |                                 |                          |  |
|---|--|--|--------|---------------------------------|--------------------------|--|
| SUBJECT: Spanish Trace Housing II Ltd. (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:   |  |  |        |                                 |                          |  |
| Teresa  | C. Behan   |  |        |                                 |                          |  |
|   |  | (Contact Person)                                   |        |                                 |                          |  |
| JDF, LLC  |  |  |        |                                 |                          |  |
|   | <del> </del>   | (Firm/Company)                                     |        |                                 |                          |  |
| 340 Pe  | mberwick Road  | , 3rd floor, Greenwich, C                          | T_0683 | 31                              |                          |  |
|   |  | (Address)  |        | <u> </u>                        |                          |  |
| Greenv  | Greenwich, CT 06831  |  |        |                                 |                          |  |
|   | ((   | ity, State and Zip Code)                           |        |                                 |                          |  |
| For further information concerning this matter, please call:  |  |  |        |                                 |                          |  |
| Teresa  | C. Behan   |  | at (   | 203                             | 869                      | -0900  |
|   | (Name of Conta   | ct Person)   |        |                                 | and D                    | aytime Telephone Number)   |
| Enclosed is a check for the following amount:   |  |  |        |                                 |                          |  |
| <b>☑ \$</b> 52.5  | io Piling Fee  | \$61.25 Filing Fee<br>and Certificate of<br>Status |        | 5.00 Filing<br>ertified Cop     |                          | \$113.75 Filing Fee,<br>Certified Copy, and<br>Certificate of Status |
| Registr<br>Division<br>Cliffor<br>2661 E  | ET ADDRES:<br>ration Section<br>on of Corporat<br>Building<br>Executive Cent<br>assee, Fl. 323 | ions<br>er Circle                                  |        | Registra<br>Division<br>P. O. B | ation<br>n of (<br>ox 63 | ADDRESS: Section Corporations 327 FL 32314                           |

## CERTIFICATE OF DISSOLUTION FOR

| Spanish Trace Housing II Lt   | d                                     |   |  |  |  |  |  |
|---|---------------------------------------|---|--|--|--|--|--|
| (Name of Florida Limited Pa   | rtnership or Limit                    | ed Liability Limited Partnership)                     |  |  |  |  |  |
| Pursuant to the provisions of section partnership or limited liability limite Florida Department of State on June document number A05000001157 Dissolution. | d partnership,<br>10, 2005            | whose certificate was filed with the assigned Florida |  |  |  |  |  |
| FIRST: Reason for dissolution: (State why partnership is submitting dissolution)  |                                       |   |  |  |  |  |  |
| Entity is no longer needed since proper   | ty was sold                           |   |  |  |  |  |  |
|   |                                       |   |  |  |  |  |  |
|   | · · · · · · · · · · · · · · · · · · · |   |  |  |  |  |  |
|   |                                       |   |  |  |  |  |  |
|   |                                       |   |  |  |  |  |  |
| SECOND: A Notice of Disso<br>(Check box if attac  |                                       | ed.   |  |  |  |  |  |
| THIRD: Effective date, if other than the d  | late of filing:                       |   |  |  |  |  |  |
|   |                                       | er the date this document is filed by the Florida     |  |  |  |  |  |
| Signatures of each general partner of s. 62041863(3) or (4), F.S.:  | r the person as                       | pointed pursuant to                                   |  |  |  |  |  |
| # 11/   | _                                     |   |  |  |  |  |  |
| Filing Fee:   | S52.50                                |   |  |  |  |  |  |
| Certified Copy (optional):<br>Certificate of Status (optional):   | \$52.50<br>\$8,75                     |   |  |  |  |  |  |

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