

Florida Department of State  
Division of Corporations  
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To:

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

From:

Account Name : TRIVEST SERVICE CORPORATION  
Account Number : I20020000111  
Phone : (305)858-2200  
Fax Number : (305)858-1629

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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DISS/TERM/CANCEL/REV OF LP/LLP  
TRIVEST FUND II MANAGER, LTD.

Certificate of Status	0
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EXAMINER

DEC 9 2011

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**CERTIFICATE OF DISSOLUTION  
FOR**

Trivest Fund II Manager, Ltd.

(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 March 27, 1995, assigned Florida document number A95000000481, hereby submits this Certificate of Dissolution.

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

The partnership has ceased doing business.

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

**THIRD:** Effective date, if other than the date of filing: December 31, 2011

(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.:

By: Trivest Equities, Inc., its general partner

By: David Gershman

David Gershman, Principal & General Counsel

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

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