Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H110002884193)))



H110002884193ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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 ETARY OF STATE

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

RECEIVED

(1 DEC -8 AM 6: 57)

SECRETARY OF STATE
ALLAHASSEE, FLORIB

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$52.50

T. CLINE

DEC - 9 2011

Electronic Filing Menu

Corporate Filing Menu

TAMINER Help

CERTIFICATE OF DISSOLUTION (((H11000288419 3))) FOR

Trivest Principals Fund II. Ltd	d	
(Name of Florida Limited I	Partnership or Limited Liability Limited Partnersh	nip)
		ed with the ed Florida
FIRST: Reason for dissolution: (State why partnership is submitting disso	lution)
The partnership has ceased do	ing business.	
		36 3
SECOND: A Notice of Dissolution is attached.		C-8
(Check box if atta	ached.)	
THIRD: Effective date, if other than the	date of filing: December 31, 2011	<u> </u>
(Effective date cannot be prior to nor mor Department of State.)	e than 90 days after the date this document is file	ed by the Florida
Signatures of each general partner		
s. 620.1803(3) or (4), F.S.:	By: Trivest Principals Fund	II, Inc., its general partner
	By: Pavid Gershman, Prince	cipal & General Counsel
——————————————————————————————————————		
Filing Fee:	\$52.50	
Certified Copy (optional):	\$52.50	
Certificate of Status (optional):	\$8.75	

(((H110002884193)))