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| (Re | equestor's Name) | |
|---|--------------------|-----------|
| (Ad | idress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nam | ne) |
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2011 SEP 29 PM 1: 28
SECRETARY OF STATE

C. LEWIS SEP 3 0 2011 EXAMINER

COVER LETTER

| Division of Corporations |
|--|
| SUBJECT: On the Park Properties 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: |
| |
| On the Park Properties II, LLC (Firm/Company) |
| 1492 South Miami Avenue (Address) |
| Miami, FL 33130 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| (Name of Person) at (786) 3648695 (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: \$25.00 Filing Fee |

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

FILEL

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| 1. The name of a limited liability company is On the Park Prop | secretary of state tallahassee. FLORIDA |
|--|---|
| 2. The Articles of Organization were filed on | |
| 3. The date the dissolution was approved: | /31/2010 |
| | limited liability company's dissolution pursuant to section ck cover letter). |
| | |
| 5. CHECK ONE: | |
| G-OR- | the limited liability company have been paid or discharged. the debts, obligations and liabilities pursuant to s. 608.4421. |
| All remaining property and assets have been dis rights and interests. | stributed among its members in accordance with their respective |
| 7. CHECK ONE: | |
| There are no suits pending against the control of t | the satisfaction of any judgment, order or decree which may be |
| Signatures of the members having the same percentage | ge of membership interests necessary to approve the dissolution: |
| Signature | Printed Name |
| | Javier Cervera |
| | |
| | |
| | |
| | |

FILING FEE: \$25.00