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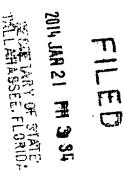
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer	
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Office Use Only



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January 14, 2014

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, Florida 32314

RE: Dissolution of TRUST US LLC Doc # L05000107346

Dear Sir or Madam,

Please accept this letter and the attached to dissolve the TRUST US LLC a Florida Corporation.

Please refer any questions to John R. Snider, 10475 Tree Spring Court, Maria Virginia 20112, (813) 230-1449.

Enclosed is the \$25.00 filing fee for the purpose of this request.

Thank you for your attention,

John R. Snider

10475 Tree Spring Court

Manassas, Virginia 20112

(813) 230-1449

COVER LETTER

TO: Registration Division o	on Section f Corporations				
SUBJECT: Dissoluton of TRUST US, LLC					
DOCUMENT NUMBER: <u>L05000107346</u>					
The enclosed Notice	e of Limited Liability (Company Dissolution and fee are submitted for filing			
Please return all correspondence concerning this matter to the following:					
John R. Snider					
	(Name of O	Contact Person) SE文			
	(Firm	n/Company)			
10475 Tree Spring Court					
		ddress)			
Manassas,	Manassas, Virginia 20112				
	(City/Stat	te and Zip Code)			
For further informat	ion concerning this mat	ter, please call:			
John R. Snider at (813) 230-1449					
(Name of	Contact Person)	(Area Code) (Daytime Telephone Numbe			
Enclosed is a check	for the following amount	nt:			
■\$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & □ \$60 Filing Fee, Certified Copy Certificate of Status & (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)			
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

Notice of Limited Liability Company Dissolution

This "Notice of Limited Liability Company Dissolution" is optional and s not required when fili dissolution.	ng a volumai	y
Name of Limited Liability Company:		
Date of dissolution was:		
Description of information that must be included in a written claim:		
	2014	wagu
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	34	
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations	-	
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations	-	
	-	
	- - -	aim is

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liab	pility company is
The Articles of Organizate document number L050	ion were filed on 11/03/2005 and assigned 00107346
	the dissolution if not effective on the date of filing: 01/14/2014
4. A description of occurrence 605.0707, Florida Statutes. Lack of business	ce that resulted in the limited liability company's dissolution pursuant to section (copy 605.0707 on back cover letter).
	20 L L
5. If there are no members, e activities and affairs:	Inter the name and address of the person appointed to wind up the company's John R. Snider
	10475 Tree Spring Court
	Manassas, Virginia 20112
6. Signature of an authorized above to wind up the compan	person or if there are no members, the signature of the person appointed and listed by's activities and affairs:
Signature	Printed Name
John dx	John R. Snider
	EH INC EEE, \$25.00