

**ARTICLES OF DISSOLUTION
OF
LAND, BUILDING & BEYOND II, LLC**

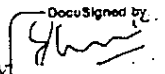
Land, Building & Beyond II, LLC, a limited liability company organized and existing under and by virtue of the Florida Revised Limited Liability Company Act (the "Company"), does hereby submit for filing these Articles of Dissolution pursuant to Section 605.0707 of the Florida Revised Limited Liability Company Act and

DOES HEREBY CERTIFY THAT:

- FIRST: The name of the Company is "LAND, BUILDING & BEYOND II, LLC".
- SECOND: The Articles of Organization of the Company were filed on July 2, 2009 and assigned Document No. L09000064214.
- THIRD: The dissolution of the Company was approved by written consent of the Members and Managers on January 31, 2022.
- FOURTH: The occurrence that resulted in the Company's dissolution is the written consent of the members of the Company to dissolve the Company in accordance with the terms of the Regulations and Operating Agreement of the Company, as provided in Section 605.0701(1), Florida Statutes.
- FIFTH: These Articles of Dissolution shall be effective upon filing with the Florida Department of State.

IN WITNESS WHEREOF, these Articles of Dissolution have been executed as of the 2nd day of February, 2022.

LAND, BUILDING & BEYOND II, LLC

By  _____
Dr. Rajendra Hippalgaonkar, a Manager

FILED
22 FEB -3 AM 11:10

Notice of Limited Liability Company Dissolution

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "*Notice of Limited Liability Company Dissolution*" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Land, Building & Beyond II, LLC

Document number of Limited Liability Company is: L09000064214

Date of dissolution was: February 2, 2022

Description of information that must be included in a written claim:

NAME OF CLAIMANT, CONTACT INFORMATION OF THE CLAIMANT, THE BASIS FOR THE CLAIM,
THE SOCIAL SECURITY NUMBER, TIN OR EIN OF THE CLAIMANT, THE AMOUNT OF THE CLAIM,
WHETHER THE CLAIM IS CONTINGENT OR UNLIQUIDATED, AND WHETHER THE CLAIM IS SECURED.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

2776 ENTERPRISE ROAD

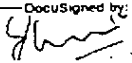
STE 100

ORANGE CITY, FL 32763

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Rajendra Hippalgaonkar, M.D.

Printed Name of the Person Filing

DocuSigned by:


Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00

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