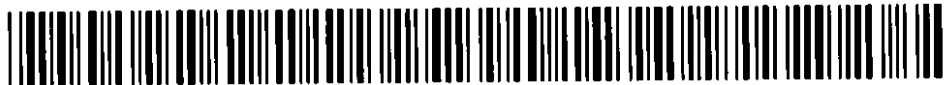


Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : SMITH HULSEY & BUSEY
Account Number : 075030000653
Phone : (904)359-7700
Fax Number : (904)359-7700

LLC DISSOLUTION OR WITHDRAWAL
CON II, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

2020 JUN 12 AM 8:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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JUN 15 2020

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**ARTICLES OF DISSOLUTION
OF
CON II, LLC**

ARTICLE I

The name of this limited liability company is CON II, LLC (the "Company").

ARTICLE II

The Articles of Organization of the Company were filed on May 10, 2010, and assigned Document Number L10000050089.

ARTICLE III

The dissolution of the Company was authorized by written consent adopted by all of the Members of the Company on June 11, 2020.

ARTICLE IV

All debts, obligations, and liabilities of the Company have been paid or discharged, or adequate provisions have been made therefor, pursuant to Section 605.0709, Florida Statutes.

ARTICLE V

All remaining property and assets of the Company have been distributed to its Members in accordance with the governing documents of the Company and the Florida Revised Limited Liability Company Act.

ARTICLE VI

There are no suits pending against the Company in any court.

ARTICLE VII

The effective date of the dissolution of the Company shall be as of the date of filing these Articles of Dissolution.

Dated the 11th day of June, 2020.

CON II, LLC

By: Vicki Shafer
Vicki Shafer
Manager

FILED
JUN 12 2020
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

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(((H20000178648 3)))

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: CON II, LLC

Document number of Limited Liability Company is: L10000050089

Date of dissolution was: 06/11/2020

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

The identity and contact information for the person or entity asserting the claim, a description of the basis for the claim, the date the date the claim arose, the amount of the claim, and a description of the facts and circumstances underlying the claim.

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

5912 New Kings Road

Jacksonville, FL 32209

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.

Vicki Shafer

Printed Name of the Person Filing

Vicki Shafer

Signature of the Person Filing

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

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