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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (512)418-6949 Phone (954)208-0845 Fax Number

## LLC DISSOLUTION OR WITHDRAWAL RREF RB-FL TRT, LLC

Certificate of Status	0
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## COVER LETTER

TO:	Registration Section Division of Corporations								
SHRIF	SUBJECT: RREF RB-FL TRT, LLC								
20001		ted Liability Con	ர்வர்)						
	LORI BUCKLER								
(Name of Person)									
	RREF RB-FL TRT, LLC								
	RREF RB-FL TRT, LLC  (Name of Limited Liability Company)  sed Articles of Dissolution and fee(s) are submitted for filing.  um all correspondence concerning this matter to the following:  LORE BUCKLER  (Name of Person)  RREF RB-FL TRT, LLC  (Finn/Company)  790 NW 107TH AVENUE, SUITE 400  (Address)  MIAMI, FLORIDA 33172  (City/State and Zip Code)  (City/State and Zip Code)  (Aren Code & Daytime Telephene Number)  at (305								
	790 NW 107TH AVENUE, SUITE 400								
		(Address)							
	MIAMI, FLORIDA 33172								
	(City/St	ate and Zip Code)		••• !					
For fur	ther information concerning this matter, please call	:		1					
	LORI BUCKLER	at ( 305	229-6675	3.					
	(Name of Person)	(Are		5					
Enclose	d is a check for the following amount:								
	\$25,00 Filing Fee and Certificate of Dissolution								
				S:					
	P.O. Box 6327		Clifton Building						
	Tallahassee, FL 32314		dlahassee, FL 32301						

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability	company is			
RREF RB-FI. TRT, LJ.C	· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u> </u>	
The Articles of Organization we document number L110001374	vere filed on 12/6/2011		and assigned	
3. The delayed effective date the	dissolution if not effective	on the date of fi	ling:	
4. A description of occurrence the 605.0707, Florida Statutes, (cop. No longer needed	at resulted in the limited li py 605.0707 on back cove	r letter).	•	
5. If there are no members, enter activities and affairs:	•		· 	apany's 7
				15.
6. Signature of an authorized persabove to wind up the company's a	son or if there are no mem ictivities and affairs:	bers, the signatur	e of the person appoin	ted and listed
Signature		: Prir DRI BUCKLER	nted Name	ŷ
	FILING FEI			