

LIB00000007482

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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FILED  
2014 MAR 17 PM 5:00  
CLERK OF STATE  
TALLAHASSEE FLORIDA

MAR 18 2014  
D. BRUCE

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: THE MEASURED TREASURE 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:

NICOLE B. WILBUR  
(Name of Person)

THE MEASURED TREASURE, LLC  
(Firm/Company)

7311 W. COLONIAL DR.  
(Address)

ORLANDO, FL. 32818  
(City/State and Zip Code)

For further information concerning this matter, please call:

NICOLE WILBUR at (321) 356-0555  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee and Certificate of Dissolution

☐ \$55.00 Filing Fee, Certificate of Dissolution &  
Certified Copy (additional copy is enclosed)

**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

FILED  
2014 MAR 17 PM 5:00  
TALLAHASSEE, FLORIDA  
CLERK OF THE COURT

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

THE MEASURED TREASURE II, LLC

2. The Articles of Organization were filed on JANUARY 14, 2013 and assigned

document number L13000007482

3. The delayed effective date the dissolution if not effective on the date of filing: 1-1-2013  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

KIMCO REALTY LEASED US A UNIT FOR OUR CASH FOR HOLD  
BUSINESS THROUGH THEIR SHORT TERM LEASING DEPT. & AT THE  
SAME TIME, THEIR LONG TERM LEASING DEPT. LEASED A  
SPACE TO ANOTHER CASH FOR HOLD STORE IN THE SAME SHOPPING  
CENTER.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

Nicole B. Wilbur  
Signature

NICOLE B. WILBUR  
Printed Name

2014 MAR 17 PM 5:00  
CLERK OF DISTRICT COURT  
ALACHUA COUNTY  
FLORIDA

FILED

**FILING FEE: \$25.00**

## Notice of Limited Liability Company Dissolution

**NOTE: This page is optional**

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: \_\_\_\_\_

Document number of Limited Liability Company is: \_\_\_\_\_

Date of dissolution was: \_\_\_\_\_

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

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

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**FILED**  
2014 MAR 17 PM 5:00  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

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.

\_\_\_\_\_  
Printed Name of the Person Filing

\_\_\_\_\_  
Signature of the Person Filing

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