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| (Re | equestor's Name) | | |
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| (Ad | ldress) | | |
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| (City/State/Zip/Phone #) | | | |
| PICK-UP | ☐ WAIT | MAIL | |
| (Bu | isiness Entity Nar | me) | |
| (Document Number) | | | |
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| TO: Registration Section Division of Corporations | • |
| SUBJECT: TREIT REA (Name of Limited | -/TY LCC d Liability Company) |
| The enclosed Articles of Dissolution and fee(s) are submitte | d for filing. |
| Please return all correspondence concerning this matter to the | ne following: |
| 2785 VicTu | of Person) Company) Company) Address) And Zip Code) |
| For further information concerning this matter, please call: | |
| ROBERT W. TREITZ (Name of Person) | at (502) 376-7/77 (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: | Street Address: |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Old Address 5694 CRAFT CT. 22163

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| 1. | The name of a limited liability company is The name of a limited liability company is The name of a limited liability company is | |
|----------|---|---------------------------|
| 2. | The name of a limited liability company is The Articles of Organization were filed on JUNE 18, 20 and assigned | |
| | document number <u>219000161272</u> | |
| 3. | The delayed effective date the dissolution if not effective on the date of filing: | 20 200 on be |
| 4. | A description of occurrence that resulted in the limited liability company's dissolution pursuant to sectio 605.0707. Florida Statutes, (copy 605.0707 on back cover letter). | n |
| | Sold BUSÍNESS | SECIAL SECIAL |
| | 5 | 403 46 0 A835 03113 |
| 5. | If there are no members, enter the name and address of the person appointed to wind up the company-s activities and affairs: $Ren T \omega \cdot TReifz$ | F STATE |
| | 2785 lietor CF | द्भ |
| | The UIIIAGES FL 32163 | |
| | 502-386-7177 | |
| 6. ab | Signature of an authorized person or if there are no members, the signature of the person appointed and loove to wind up the company's activities and affairs: | isted |
| -(| Pobent W. Troits | |
| _ | Signature Printed Name FILING FFF: \$25.00 | |