| (Re                                     | equestor's Name)  |             |
|---|-------------------|-------------|
| (Ad                                     | Idress)           |             |
| (Ad                                     | ldress)           |             |
| (Cit                                    | ty/State/Zip/Phon | e #)        |
| PICK-UP                                 | MAIT              | MAIL        |
| (Ви                                     | siness Entity Na  | me)         |
| (Document Number)                       |                   |             |
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SECRETARY OF STATE
TALLAHASSEE: FLORIDA

A D 155

## **COVER LETTER**

TO: Amendment Section

| Division of Corporations   |   |  |  |  |
|--|---|--|--|--|
| SUBJECT: LNR Capital Mortgage  | Holdings, Inc.  |  |  |  |
|  |   |  |  |  |
| DOCUMENT NUMBER: P98000002   | 2602  |  |  |  |
| The enclosed Articles of Dissolution and fee are submitted for filing.   |   |  |  |  |
| Please return all correspondence concerning                              | this matter to the following:   |  |  |  |
| Madelyn Ocasio   |   |  |  |  |
| (Name of C   | Contact Person)   |  |  |  |
| LNR Property LLC   |   |  |  |  |
| (Firm/Company)   |   |  |  |  |
| 1601 Washington Avenue, Suite  | 800   |  |  |  |
| (Ad  | ldress)   |  |  |  |
| Miami Beach, FL 33139  |   |  |  |  |
| (City/Stat   | e and Zip Code)   |  |  |  |
| For further information concerning this mat                              | ter, please call:   |  |  |  |
| Madelyn Ocasio   | at ( 305 ) 695-5705   |  |  |  |
| (Name of Contact Person)   | (Area Code & Daytime Telephone Number)  |  |  |  |
| Enclosed is a check for the following amoun                              | nt:   |  |  |  |
| ✓ \$35 Filing Fee  \$\times \$43.75 Filing Fee &   Certificate of Status | \$43.75 Filing Fee & \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)  \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) |  |  |  |
| MAILING ADDRESS: Amendment Section                                       | STREET ADDRESS: Amendment Section   |  |  |  |
| Division of Corporations   | Division of Corporations  |  |  |  |
| P.O. Box 6327  | Clifton Building  |  |  |  |

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

| FIRST:  | The name of the corporation as currently filed with the Florida Department o  | f State:        |                     |
|---------|---|-----------------|---------------------|
|         | LNR Capital Mortgage Holdings, Inc.   |                 |                     |
| SECOND: | The document number of the corporation (if known): P9800002602  |                 |                     |
| THIRD:  | The date dissolution was authorized: 10/01/2010   |                 | _                   |
|         | Effective date of dissolution if applicable: (no more than 90 days after dissolution  | file date)      | _                   |
| FOURTH: | Adoption of Dissolution (CHECK ONE)   |                 |                     |
|         | Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.   | for dissoluti   | ion                 |
|         | Dissolution was approved by the shareholders through voting groups.   |                 |                     |
|         | The following statement must be separately provided for each voting group e to vote separately on the plan to dissolve:   | entitled        |                     |
|         | The number of votes cast for dissolution was sufficient for approval by   | 10 OCT 19 PM 1: | SECRETA<br>TALL AHA |
|         | (voting group)  | 19 P)           | SSEE.               |
|         | Signature:  | -: 58           | FLORIDA             |
| ·       | (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary) |                 |                     |
|         | James A. Whitlow  |                 |                     |
|         | (Typed or printed name of person signing)   |                 |                     |
|         | Vice President / Secretary  |                 |                     |
|         | (Title of person signing)   |                 |                     |

Filing Fee: \$35