## M0700000 6298

(2				
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



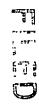
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## **COVER LETTER**

	ation Section n of Corporations			
SUBJECT:	_PF Tampa, LLC			
	(Name of For	eign Limited Liability (	Company)	
Dear Sir or Mac	am:			
The enclosed w	thdrawal and fee(s) are submitted	I for filing.		
Please return all	correspondence concerning this	matter to the following	:	
Bridget Guy				
	(Name of Person)			
LaSalle Inve	estment Management			
	(Firm/Company)		•	
333 West W	acker Drive, 23rd Floor			
	(Address)			
Chicago, IL	60606			
	(City/State and Zip Code	n		
For further infor	mation concerning this matter, pl	ease call;		
Bridget Guy		312	897-4000	
	(Name of Person)	at ( (Area Code &	Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Regist Divisio P.O. B	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a cl	eck for the following amount:			
☑ \$25 Filing Fe	e ☐ \$30 Filing Fee & Certificate of Status	☐ \$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee. Certificate of Status & Certified Copy	



LPF Tampa, LLC
(Name of limited liability company)
pelaware
(Jurisdiction of its organization)
0/22/2007
(Date registered with Florida Department of State)
10700006298
(Florida Document Number)
his limited liability company is withdrawing its certificate of authority in this state.
(Signature of authorized representative)  Bridget Guy
(Typed or printed name of signee)

Filing Fee: \$25.00