

A01000000126

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

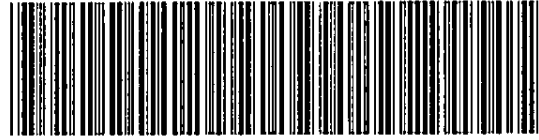
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700463152827

FILED RECEIVED

2025 DEC 29 PM 4: 27 2025 DEC 29 AM 11: 24
SECRETARY OF STATE
FALLS CHURCH, VA 22046
STATE OF VIRGINIA



CSC, Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: x61563

To: Department Of State, Division Of Corporations
From: Shauna Godbolt
Ext: x61563
Date: 12/29/25
Order #: 5010384-7
Re: RISE 2534 HOLDING LIMITED PARTNERSHIP
Processing Method: Routine

A handwritten signature in black ink, appearing to read 'Shauna Godbolt', is written in a cursive style.

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Dissolution/Cancellation/Termination
Amount to be deducted from our State Account: \$52.50 - FL State Account Number:
120000000195

Please take the following action:
File in your office on basis
Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RISE 2534 HOLDING LIMITED PARTNERSHIP

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Dissolution and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
ANDREA KLEIN

(Contact Person)

SENTINEL REAL ESTATE CORPORATION

(Firm/Company)

1251 AVENUE OF THE AMERICAS, 24TH FL

(Address)

NEW YORK CITY, NY 10020

(City, State and Zip Code)

For further information concerning this matter, please call:

ANDREA KLEIN at (212) 408-5019

(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$52.50 Filing Fee \$61.25 Filing Fee and Certificate of Status \$105.00 Filing Fee and Certified Copy \$113.75 Filing Fee, Certified Copy, and Certificate of Status

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

CERTIFICATE OF DISSOLUTION
FOR

FILED

2025 DEC 29 PM 4: 27

RISE 2534 HOLDING LIMITED PARTNERSHIP

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 620.1203, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on JANUARY 16, 2001, assigned Florida document number A01000000126, hereby submits this Certificate of Dissolution.

FIRST: Reason for dissolution: (State why partnership is submitting dissolution)

PARTNERSHIP IS NO LONGER NEEDED

SECOND: A Notice of Dissolution is attached.
(Check box if attached.)

THIRD: Effective date, if other than the date of filing: DECEMBER 23, 2025

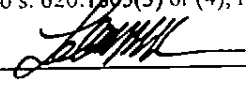
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signatures of each general partner or the person appointed pursuant to s. 620.1203(3) or (4), F.S.:

RISE 2534 GP LLC - GENERAL PARTNER

BY



LELAND ROTH

Filing Fee: \$52.50
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75

DIS-651353