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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : LEGALINC CORPORATE SERVICES INC.
Account Number : 12018000011
Phone : (844)386-0178
Fax Number : (214)317-4754

DISS/TERM/CANCEL/REV OF LP/LLP
ICM (VII) ATRIUM LP

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STATEMENT OF TERMINATION
FOR

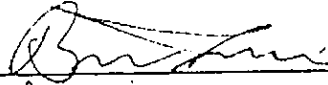
ICM (VII) ATRIUM LP

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

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 11/06/2015, hereby submits this Statement of Termination.

The limited partnership or limited liability limited partnership has completed winding up its affairs and wishes to file a statement of termination.

Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:



Bruce Timm
ICM (VII) Atrium Management LLC

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