

B040000000004

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

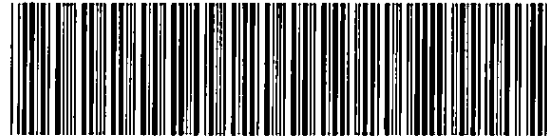
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



500409454415

Notice of
Cancellation

RECEIVED

FILED

2023 JUN -8 AM 10:41

2023 JUN -8 AM 9:18

CLERK OF COURT
TALLAHASSEE, FLORIDA

CLERK OF STATE
TALLAHASSEE, FLORIDA

A. RAMSEY

JUN 09 2023

CT CORP
(850) 656-4724
3558 lakesore Drive
Tallahassee, FL 32312

Date: 06/08/2023

Acc#120160000072

en: c SW

Name:	ART Mortgage Borrower, L.P.
Document #:	
Order #:	14905098 - 242

Certified Copy of Arts & Amend:	<input type="checkbox"/>	1-2 FILING	
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>	1. CANCELLATION 2. REGISTRATION	
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input type="checkbox"/>
	Plain: <input checked="" type="checkbox"/>
	COGS: <input type="checkbox"/>

Email Address for Annual Report Notifications:

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Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ **52.50**

Thank you!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ART MORTGAGE BORROWER, L.P.
(Name of Foreign Limited Partnership or Limited Liability Limited Partnership)

The enclosed Notice of Cancellation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Julie Peyton

(Contact Person)

Americold Logistics, LLC

(Firm/Company)

10 Glenlake Parkway NE, South Tower, Suite 600

(Address)

Atlanta, GA 30328

(City, State and Zip Code)

For further information concerning this matter, please call:

Julie Peyton

(Name of Contact Person)

at (404)

) 434-8956

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$52.50 Filing Fee ☐ \$61.25 Filing Fee
and Certificate of ☐ \$105.00 Filing Fee
Status 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

FILED

**NOTICE OF CANCELLATION
FOR
FOREIGN LIMITED PARTNERSHIP
OR
LIMITED LIABILITY LIMITED PARTNERSHIP**

2023 JUN -8 AM 9:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ART MORTGAGE BORROWER, L.P.

(Name of limited partnership or limited liability limited partnership)

Delaware

(Jurisdiction of formation)

01/08/2004

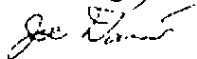
(Date authorized to transact business in Florida)

This foreign limited partnership or limited liability limited partnership is no longer transacting business in Florida and wishes to cancel its certificate of authority pursuant to s. 620.1907, F.S.

This entity appoints the Florida Department of State as its agent for service of process for rights of action arising out of the transaction of business in this state.

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

Signature of a general partner:



Typed or printed name:

JOE DAVIS, MANAGER OF ART MORTGAGE BORROWER GP LLC, ITS GENERAL PARTNER

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