B06000000433

	(Requestor's Name)			
(Address)				
(Address)				
	(City/State/Zip/Phone #)			
PICK-UF	WAIT MAIL			
	(Business Entity Name)			
	(Dusiness Entity Warne)			
	(Document Number)			
	(2000)			
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

Office Use Only



700334404737

09/30/19--0103;--028 **61.25



Canculation

OCT 1 6 2019 I ALBRITTON

COVER LETTER

TO: Registration S Division of Co				
	s Place Assoc			
(Name of F	oreign Limited Partnershi	p or Limited Liabili	ıy Limit	ed Partnership)
The enclosed Notice	of Cancellation and fe	ee(s) are submitte	ed for t	iling.
Please return all corre	espondence concernin	g this matter to:		
Heidi Miller			_	
	(Contact Person)			
Virtu Investmer			_	
	(Firm/Company)	0.00		
5973 Avenida	Encinas, Suite	e 300 	_	
	(Address)			
Carlsbad, CA	92008			
((lity, State and Zip Code)		_	
For further informatic	on concerning this ma	tter inlease calls		
Heidi Miller	m concerning and ma	760	920	9-4700
(Name of Conta	et Person)	att (_)	vtime Telephone Number)
Enclosed is a check f	or the following amou	int:		
S52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	S105.00 Filing Fee and Certified Copy		S113.75 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRESS	S:	MAIL	ING A	ADDRESS:
Registration Section		Registration Section		
Division of Corporations		Division of Corporations P. O. Box 6327		
Clifton Building 2661 Executive Center Circle		Tallahassee, FL 32314		
Tallahassee, FL 3230				· · · · · · · · · · · · · · · · · · ·

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

Collins Place	Associates, LP	
(Name of foreign limited partnership or limited liability limited partnership) B0600000433		
	(Florida Document Number of the Foreign LP or LLLP)	
Delaware		
-	(Jurisdiction of formation)	
12-04-06		
	(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: upon 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.)

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.

Signature of a general partner.)
Typed or printed name:	
Scott McWhorter	
Filing Fee:	\$52,50
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	S8.75