

B07000000103

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

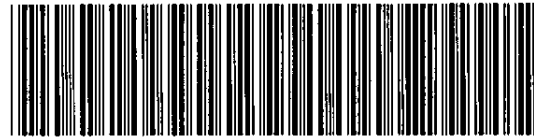
(Business Entity Name)

(Document Number)

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15 JUL 16 PM 3:24
STATE DEPT OF STATE
HALLMARKS, FLORIDA

JUL 20 2015
J. HARRIS

file first

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 710446 4301771

AUTHORIZATION :

Spencer

COST LIMIT : \$ 52.50

ORDER DATE : July 16, 2015

ORDER TIME : 3:24 PM

ORDER NO. : 710446-060

CUSTOMER NO: 4301771

FOREIGN FILINGS

NAME: CSH PORT ST. LUCIE LP

 CORPORATE
XX LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF STATUS

CONTACT PERSON: Courtney Williams - EXT# 62935

EXAMINER: _____

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

CSH Port St. Lucie LP

(Name of limited partnership or limited liability limited partnership)

Delaware

(Jurisdiction of formation)

March 26, 2007

(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:
CSH Operator GP LLC

By: 

Typed or printed name:

Jonathan Boulakia, Authorized Signing Officer

Signature Date: June 29, 2015

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

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