B07000000 197

(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



900419909969

2023 DEC 20 PH 12: 39

RECEIVED



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	12/20/2023	_				
Name:	KEN					
	22159	03				
Entity Name	:	TRIVEST FU	JND IV-A, LP			
 ☐ Articles of Incorporation/Authorization to Transact Business ☐ Amendment ☐ Change of Agent ☐ Reinstatement ☐ Conversion ☐ Merger ☑ Dissolution/Withdrawal ☐ Fictitious Name 						
☐ Othe	r					
Authorized A		\$52.50				

F: 800.944.6607

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: TRIVEST FUND IV-A, L.P.	
(Name of Foreign Limited Partnersh	pip or Limited Liability Limited Partnership)
The enclosed Notice of Cancellation and	fee(s) are submitted for filing.
Please return all correspondence concerni	ng this matter to:
MICHELSA CALDERON	
(Contact Person)	
TRIVEST PARTNERS	
(Firm/Company)	
2811 PONCE DE LEON BLVD. STE 400	<u></u>
(Address)	
CORAL GABLES, FL 33134	
(City, State and Zip Code)	
For further information concerning this m	atter, please call:
MICHELSA CALDERON	at (305) 858-2200
(Name of Contact Person)	(Area Code and Daytime Telephone Number)
Enclosed is a check for the following amo	ount:
S52.50 Filing Fee S61.25 Filing Fee and Certificate of Status	☐ \$105.00 Filing Fee and Certified Copy Certified Copy. and Certificate of Status
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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

TRIVEST FUND IV-A, L.P.				
(Name of foreign limited p	partnership or limite	ed liability limited partnersh	ութ)	
B0700000197				
(Florida Docume	ent Number of the F	Foreign LP or LLLP)		_
DELAWARE				
	urisdiction of forma	ation)		_
06/21/2007				
(Date author	ized to transact bus	iness in Florida)		_
This foreign limited partnership or transacting business in Florida and s. 620.1907, F.S.)
This entity appoints the Florida Deprights of action arising out of the tra		-	e of process for	r
Effective date, if other than the date (Effective date cannot be prior to nor more Department of State.)	e of filing: 12/31/2 e than 90 days after	2023 the date this document is fi	iled by the Florida	a
NOTE: If the date inserted in this requirements, this date will not be I Department of State's records.			on the—	3 3 3 3
Signature of a general partner:			AHA AHA	1
Parid Gahnow		_	20 I	
Typed or printed name:			ALLAHASSEE, FLORIDA	
Trivest Partners GP, LLC / By: David Ger	shman	_	39 10A	
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75			