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| Certified Copies          | Certificates      | s of Status |
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| Special Instructions to F | iling Officer:    |             |
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## BLANCHARD, KRASNER & FRENCH

A PROFESSIONAL CORPORATION

ALAN W. FRENCH (Deceased)

TELEPHONE: (858) 551-2440 FACSIMILE: (858) 551-2434 WEB: http://www.bkflaw.com

800 SILVERADO STREET, SECOND FLOOR LA JOLLA, CALIFORNIA 92037

April 19, 2016

Division of Corporations Registration Section P:O. Box 6327 Tallahassee, FL 32314

Re: Notice of Cancellation - Foreign Limited Partnership

Our File No.: 1003-332

Dear Sir or Madam:

· Enclosed please find the following documents for REA Modesto, LP:

- 1) Cover Letter;
- 2) One (1) executed original of the Notice of Cancellation Foreign Limited Partnership (the "Notice"); and
- 3) A check in the amount of \$52.50 for the filing fee, payable to the Department of Corporations.

Please return the certified "filed" stamped endorsed copy of the Notice, in the enclosed self-addressed stamped envelope. If you have any questions, please feel free to contact me at (858) 551-2440. Thank you very much for all of your assistance.

Paralegal

For Blanchard, Krasner & French

AVT/ Enclosures ...

F:\Clients\1003 Midtown National Group\332 (MODE) REA Modesto LP\01 Correspondence\FLDepttofCorpLtr20160414-MODECancellation doc

## **COVER LETTER**

| TO: Registration : Division of C              |  |   |                               |
|---|--|---|-------------------------------|
| SUBJECT: REA                                  |  |   |                               |
| (Name of I                                    | Foreign Limited Partnersh                    | ip or Limited Liabili                   | ty Limited Partnership)       |
| The enclosed Notice                           | of Cancellation and f                        | ee(s) are submitte                      | ed for filing.                |
| Please return all corr                        | espondence concerni                          | ng this matter to:                      |                               |
| Alexandria Trip                               | ooli   |   | _                             |
|   | (Contact Person)                             |   |                               |
| Blanchard, Kra                                | sner & French                                |   | _                             |
|   | (Firm/Company)                               |   |                               |
| 800 Silverado                                 | Street, 2nd Floo                             | r                                       | _                             |
|   | (Address)                                    |   |                               |
| La Jolla, CA 92                               | 2037   |   |                               |
| (   | City, State and Zip Code)                    |   | -                             |
|   |  |   |                               |
| For further informati                         | on concerning this ma                        | atter, please call:                     |                               |
| Ali Tripoli                                   |  | at ( 858                                | <sub>)</sub> 551-2440         |
| (Name of Contr                                | act Person)                                  | (Area Code                              | and Daytime Telephone Number) |
| Enclosed is a check t                         | for the following amo                        | unt:                                    |                               |
| \$52.50 Filing Fee                            | \$61.25 Filing Fee and Certificate of Status | \$105.00 Filing<br>and Certified Co     |                               |
| STREET ADDRES                                 | S:   | MAIL                                    | ING 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 323                           |  |   |                               |

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



| REA MODESTO, LP  |
|--|
| (Name of limited partnership or limited liability limited partnership)   |
| CALIFORNIA   |
| (Jurisdiction of formation)  |
| 04/24/2008   |
| (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: TRACEY OLSON, MANAGER OF MNG REAL ESTATE INVESTMENTS, LLC, GENERAL PARTNER  |
| Filing Fee: \$52.50<br>Certified Copy (optional): \$52.50  |

\$8.75

Certificate of Status (optional):