

Division of Corporations

Page 1 of 2

Black Box 109

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 205-8842
Fax Number : (850) 878-5368

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**REGISTERED AGENT RESIGNATION
DALLAND PROPERTIES, L.P.**

Certificate of Status	0
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DALLAND PROPERTIES, L.P.
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: B12000000109

The enclosed Resignation of Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Theresa Alfieri
Contact Person

NRAI SERVICES INC
Firm/Company

111 8th Ave - 13th Floor
Address

New York, NY 10011
City, State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Theresa Alfieri at (212) 894-8940
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for:

☐ \$87.50 Filing Fee ☐ \$140.00 (\$87.50 Filing Fee and \$52.50 Certified Copy Fee)

STREET ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Amendment Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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**RESIGNATION OF REGISTERED AGENT
FOR
LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP**

Pursuant to the provisions of section 620.1116, Florida Statutes, the undersigned,

NRAI SERVICES, INC. hereby resigns as
Name of Registered Agent

Registered Agent for DALLAND PROPERTIES, L.P.
Name of Limited Partnership or Limited Liability Limited Partnership

B12000000109
Florida Document Number, if known

The agent is terminated on the 31st day after the date on which this statement is filed by
the Florida Department of State.


Signature of Registered Agent

If signing on behalf of an entity:

NRAI SERVICES, INC.
Typed or Printed Name

Assistant Secretary
Capacity

Filing Fee: \$87.50
Certified Copy (optional): \$52.50