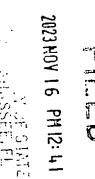
B15000000038

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

Office Use Only



200417129262





November 17, 2023

CSC ALEXXIS WEIALND-SORENSON

SUBJECT: PELLINORE DADELAND, LP

Ref. Number: B1500000038

Please give original submission date as file date

We have received your document for PELLINORE DADELAND, LP and the authorization to debit your account in the amount of \$52.50. However, the document has not been filed and is being returned for the following:

The form you submitted is for a FOREIGN LLC, but your entity is a FOREIGN LP. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tammi Cline Regulatory Specialist II Supervisor

Letter Number: 723A00026736

RECEIVED

www.sunbiz.org



Tallahassee, FL 32301-2607 850-558-1500, Ext: 61592

To: Department Of State, Division Of Corporations

From: Alexxis Weiland-Sorenson

Ext: 61592 Date: 11/17/23 Order #: 1320235-4

Re: Pellinore Dadeland, LP Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Withdrawal

AUTH:

Amount to be deducted from our State Account: \$52.50 - FL State Account Number: I2000000195

Please take the following action:

File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO: Registration Division of C	Section Corporations				
SUBJECT: Pel	linore Dadeland, LI	•			
	Foreign Limited Partners	hip or Limited Liability Lin	nited Partnership)		
		fee(s) are submitted for			
Please return all corr	espondence concerni	ng this matter to:			
	Kellie J. Hoyt, Direct	or			
	(Contact Person)				2(
Barings LLC					231
	(Firm/Company)			1.7	5
300 South Tryon Street, Suite 2500					=
	(Address)			20.	יי סר
	Charlotte, NC 28202	2		mir m.,	<u> </u>
(0	ity, State and Zip Code)			四三	2023 HOV 16 PM 12: 4
For further information	on concerning this ma	atter, please call:		<i>(**</i>	_
Kellie Hoyt (Name of Contact Person)		at (860)509-2340 (Area Code and Daytime Telephone Number)			
Enclosed is a check fo	or the following amou	ınt;			
X \$52.50 Filing Fee		\$105.00 Filing Fee and Certified Copy	S113.75 Filing Fee, Certified Copy, and Certificate of Status		
Mailing Address: Registration Section Division of Corporatio P.O. Box 6327 Fallahassee, FL 32314		Street Addre Registration S Division of C The Centre of 2415 N. Mon Tallahassee, F	Section orporations Tallahassee roe Street, Suite 81	0	

2023 NOV 16 PH 12: 4

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

Pellinore Dadeland, LP

(Name of foreign limited partnership or limited liability limited partnership)

81500000038

(Florida Document Number of the Foreign LP or LLLP)

Delaware

(Jurisdiction of formation)

February 13, 2015

(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.)

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:

Olena Walsh

Typed or printed name:

Elena Walsh, authorized representative of Dadeland CREF X GP LLC, general partner

of Pellinore Dadeland, LP

Filing Fee:

\$52.50

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75