Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H160002867243)))



H160002867243ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-63B3

From:

Account Name : CNL FINANCIAL GROUP, INC.

Account Number : 113615003626 Phone : (407)650-1000

Fax Number

: (407)540-7522

DISS/TERM/CANCEL/REV OF LP/LLP CHP ABILENE TX MOB OWNER, LP

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$52.50

16 NOV 21 AM 9: 08

HENOV 21 AM II: 42

O SIMMONS

Electronic Filing Menu

Corporate Filing Menu

Help

DIVISION OF COST OF ALLOW

partnership)

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

CHP Abilene TX MOB Owner, LP
(Name of foreign limited partnership or limited liability limited
B15000000243
(Florida Document Number of the Foreign LP or LLLP)

Delaware

(Jurisdiction of formation)

September 1, 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: November 18, 2016

(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:

Vice President of General Partner Typed or printed name: CHP Abolene TX MOB 6P, LLC

Tracey B. Bracco

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



November 21, 2016

FLORIDA DEPARTMENT OF STATE

Division of Corporations

CHP ABILENE TX MOB OWNER, LP

PO BOX 4920

ORLANDO, FL 32802-4920

SUBJECT: CHP ABILENE TX MOB OWNER, LP

REF: B15000000243

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The electronic filing cover sheet submitted with your document reflects the incorrect type of document. The cover sheet must reflect the type of document you are filing. Please generate a new fax audit cover sheet under the appropriate document type. When resubmitting your document for filing, please also send a copy of the incorrect cover sheet marked "ABANDONED".

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) 245-6051.

Yasemin Y Sulker Regulatory Specialist II FAX Aud. #: E16000284529 Letter Number: 816A00024896