

9/24/2020

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-0821
Fax Number : (850)558-1515

**DISS/TERM/CANCEL/REV OF LP/LLP
LCA LAS PALMAS, LP**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$52.50

2020 SEP 24 AM 10:51

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LCA Las Palmas, LP

(Name of Foreign Limited Partnership or Limited Liability Limited Partnership)

The enclosed Notice of Cancellation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Adrienne A. Ciancetta

(Contact Person)

Lakeside Capital Advisors LP

(Firm/Company)

30. S. Wacker Dr. Ste 2750

(Address)

Chicago, IL 60606

(City, State and Zip Code)

For further information concerning this matter, please call:

Adrienne A. Ciancetta

at (312)

879-7548

(Name of Contact Person)

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$52.50 Filing Fee

☐ \$61.25 Filing Fee
and Certificate of
Status

☐ \$105.00 Filing Fee
and Certified Copy

☐ \$113.75 Filing Fee,
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

20 SEP 26 AM 11:12

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

LCA Las Palmas, LP

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

B15000000293

(Florida Document Number of the Foreign LP or LLLP)

Delaware

(Jurisdiction of formation)

10/23/2015

(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:



Typed or printed name:

Michael J. Hornbrook, President

LCA Las Palmas, LP

By: Lakeside Capital GP LLC, its General Partner

By: Lakeside Capital Advisors LP, its Sole Member

By: LCA GP LLC, a General Partner

By: Michael J. Hornbrook, its President

Filing Fee: \$52.50

Certified Copy (optional): \$52.50

Certificate of Status (optional): \$8.75

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