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(Cit	y/State/Zip/Phone	e #)		
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Thank you!

## COVER LETTER

TO: Registration	Section		
Division of	Corporations		
SUBJECT: Name of	LPCH FLORIDA EQUIT	IES, L.P. sip or Limited Liability Lim	ited Partnership)
The enclosed Notic	e of Cancellation and i	fee(s) are submitted for	filing.
Please return all con	rrespondence concerni	ng this matter to:	
	(Contact Person)		
	(Firm/Company)		
	(Address)	<del></del> _	
	(City, State and Zip Code)		
For further informa	tion concerning this m	atter, please call:	
		at ()	
(Name of Con	itact Person)	(Area Code and D	Baytime Telephone Number)
Enclosed is a check	for the following amo	ount:	
\$52.50 Filing Fee	S61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy	S113.75 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRE	SS:	MAILING	ADDRESS:
Registration Section		Registration Section	
Division of Corporations			Corporations
Clifton Building		P. O. Box 63	
2661 Executive Cer		Tallahassee,	FL 32314
Tallahassee, FL 32	301		

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

LPCH	FLORIDA EQUITIES, L.P.
(Name of limited parts	nership or limited liability limited partnership)
	DELAWARE
	DELAWARE
(J	furisdiction of formation)
	9/26/2017
(Date author	rized to transact business in Florida)
	limited liability limited partnership is no longer wishes to cancel its certificate of authority pursuant to
This entity appoints the Florida Deprights of action arising out of the tra	partment of State as its agent for service of process for ansaction of business in this state.
Effective date, if other than the date (Effective date cannot be prior to nor more Department of State.)	e of filing: e than 90 days after the date this document is filed by the Florida
Signature of a general partner:  Leju Can Guer	<del></del>
Typed or printed name:	
LO Florida Equities GP Inc. By:Leigh Ar	nn Everett Asst Secy
Filing Fee:	\$52.50
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75