

12/6/2017

Division of Corporations

**Florida Department of State**  
**Division of Corporations**  
**Electronic Filing Cover Sheet**

**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.**

(((H170003204173)))



H170003204173ABCZ

**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)617-6383

From:

Account Name : C T CORPORATION SYSTEM  
 Account Number : FCA000000023  
 Phone : (512)418-6949  
 Fax Number : (954)208-0845

**DISS/TERM/CANCEL/REV OF LP/LLP**  
**LPCH SUNRISE BTS, L.P.**

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

2017 DEC -7 AM 9:56

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**Part 1 of 2 File Before H170003204223**

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Corporate Filing Menu

Help

S. WARREN

DEC 08 2017

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17 DEC -7 AM 8:57

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 17 DEC -7 AM 8:57  
 TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** I.PCH SUNRISE BTS, L.P.  
(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:

\_\_\_\_\_  
(Contact Person)

\_\_\_\_\_  
(Firm/Company)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City, State and Zip Code)

For further information concerning this matter, please call:

\_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> \$52.50 Filing Fee | <input type="checkbox"/> \$61.25 Filing Fee<br>and Certificate of<br>Status | <input type="checkbox"/> \$105.00 Filing Fee<br>and Certified Copy | <input type="checkbox"/> \$113.75 Filing Fee,<br>Certified Copy, and<br>Certificate of Status |
|---|---|--|---|

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

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

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

LPCH SUNRISE BTS, L.P.

(Name of limited partnership or limited liability limited partnership)

DELAWARE

(Jurisdiction of formation)

10/20/2017

(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: UPON 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.)

Signature of a general partner:

Typed or printed name:

SEE ATTACHED SHEET

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

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DEPT. OF STATE  
TALLAHASSEE, FLORIDA

**GENERAL PARTNER:**

LO SUNRISE BT'S GP, INC., Inc.  
A Texas corporation

By: Leigh Ann Everett  
Leigh Ann Everett, Assistant Secretary

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CLERK OF DISTRICT COURT  
HALL COUNTY, FLORIDA