B1800000055

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

Office Use Only



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COVER LETTER

то:	Registration S Division of C					
CHRI	ECT: Kingfisho	er Land-Secured Bond Fun	d, LP			
SUDJ		Foreign Limited Partnershi	p or Limited Liabili	ty Limited Partnership)		
The er	nclosed Notice	of Cancellation and fo	ee(s) are submitte	ed for filing.		
Please	return all corr	espondence concernin	g this matter to:			
Nancy	Hill			_		
		(Contact Person)				
Codina	Partners LLC			_		
		(Firm/Company)				
2020 S	alzedo Street, 5th	FL		_		
		(Address)		-		
Coral C	Gables, FL 33134					
-	(City, State and Zip Code)		_		
For fu	For further information concerning this matter, please call:					
Nancy	нап		at (³⁰⁵	529-1300		
	(Name of Conta	act Person)		and Daytime Telephone Number)		
Enclos	sed is a check t	for the following amou	ınt:			
■ \$52	2.50 Filing Fee	S61.25 Filing Fee and Certificate of Status	S105.00 Filin and Certified			
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registi Division The Co 2415 N	Address: ration Section on of Corporations entre of Tallahassee J. Monroe Street, Suite 810 assee, FL 32303			

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

Kingfisher Land-Secured Bond Fund	LP	
(Name of foreign limited	partnership or limited liabili	ty limited partnership)
B18000000055		
(Florida Docu	nent Number of the Foreign I	LP or LLLP)
Delaware		
	(Jurisdiction of formation)	
March 2, 2018		
(Date author)	orized to transact business in	Florida)
This foreign limited partnership o transacting business in Florida and s. 620.1907, F.S.	•	•
This entity appoints the Florida D rights of action arising out of the t	•	•
Effective date, if other than the da (Effective date cannot be prior to nor mo Department of State.)		,
NOTE: If the date inserted in this requirements, this date will not be Department of State's records.		
Signature of a general partner:		
ette		7922 f
Typed or printed name:	•	€ 28
KLSB Fund GP, LLC by Armando Codi	na, Manager	0226-028 PM 1:14
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75	STATE