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(((H25000159420 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 Phone : (855)498-5500 Fax Number : (800)432-3622

DISS/TERM/CANCEL/REV OF LP/LLP NADG NNN FRED (FL) LP

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Corporate Filing Menu

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K. SALY

MAY - 2 2025

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		ER LETTER			
TO: Registration	Section Corporations				
SUBJECT:		G NNN FRED (FL) LF	•		
(Name of	Foreign Limited Partnersh	ip or Limited Liability Limit	ed Partnership)		
The enclosed Notice	e of Cancellation and f	ee(s) are submitted for f	iling.		
Please return all con	respondence concernir	ng this matter to:			
		<u> </u>			
	(Contact Person)				
Capitol Services -	Corporate Filings To (Firm/Company)	eam			
	• • •				
515 East Park Ave					
	(Address)				
Tallahassee, FL 3	2301				
•	(City, State and Zip Code)				
For further informat	ion concerning this ma	atter, please call:			
		at (855) 498	- 5500		
(Name of Cont	(Name of Contact Person) (Area Code and Daytime Telephone Numb		ytime Telephone Number)		
Enclosed is a check	for the following amo	unt:			
\$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		
STREET ADDRESS:		MAILING ADDRESS:			
Amendment Section			Amendment Section		
Division of Corporations		Division of Corporations			
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		P.O. Box 6327 Tallahassee, FL 32314			
Tallahassec, FL 323	•	rananassee, r	L 32314		

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NOTICE OF CANCELLATION FOR POREIGN LIMITED PARTNERSHIP

NOTIC	E OF CANCE	LLATION		122
ROPFICN	FOR LIMITED PA	RTNERSHIP	General Control	The state of the s
FOREIGN	OR	KINERSIII	· ***	The Contract of the Contract o
LIMITED LIAB	ILITY LIMITE	ED PARTNERSHII	P 多	
NAD	G NNN FRED	(FL) LP		CILCI MARCO
(Name of foreign limit	ed partnership or li	mited liability limited pa	ertnership)	
	B1800000017	74		
(Flurida Documen	at Number of the Fe	oreign LP or LLLP)		-
	Delaware			
(Ji	urisdiction of forms	ution)		_
	June 28, 201	8		
(Date authori	ized to transact busi	iness in Florida)		_
8. 620.1907, F.S. This entity appoints the Florida Deprights of action arising out of the tra			rice of process for	τ
Effective date, if other than the date (Effective date cannot be prior to nor more Department of State.)	; of filing: than 90 days after	the date this document i	is filed by the Florida	נ
NOTE: If the date inserted in this trequirements, this date will not be liberartment of State's records.				
Signature of a general partner:		_		•
Typed or printed name:				
Stephen Preston		_		
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75			