18500000 PI

(R	equestor's Name)			
(A	ddress)			
(A	ddress)			
(C	ity/State/Zip/Phone	· #)		
PICK-UP	MAIT	MAIL		
(B	usiness Entity Nam	ne)		
(D	ocument Number)			
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



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RECEIVED

2022 DEC 27 AH 10: 27

C/ 12/28/2022

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195					
REFERENCE : 291278 4707755					
AUTHORIZATION: Significações					
COST LIMIT : \$ 52.50					
ORDER DATE: December 27, 2022					
ORDER TIME : 1:26 PM					
ORDER NO. : 291278-025					
CUSTOMER NO: 4707755					
FOREIGN FILINGS					
NAME: PROVEDA II LIMITED PARTNERSHIP					
CORPORATE XX LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY					
XXXX WITHDRAWAL/CANCELLATION					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF STATUS					

EXAMINER:

CONTACT PERSON: Alexxis Weiland - EXT#

COVER LETTER

TO:	Registration S Division of C			
CHDI	ECT: CANCEL	LATION OF PROVEDA	A II LIMITED PART	TNERSHIP
SUBI		oreign Limited Partnershi	p or Limited Liabili	ty Limited Partnership)
The e	nclosed Notice	of Cancellation and fo	ee(s) are submitte	ed for filing.
Please	e return all corr	espondence concernin	g this matter to:	
MERE	EDITH MANIATT	Υ		
		(Contact Person)		-
C/O H	IASCOE ASSOC	IATES INC.		
		(Firm/Company)		•
24 FIE	ELD POINT ROA	D		
		(Address)		-
GREE	ENWICH, CT 068	30		
	((City, State and Zip Code)		-
For fu	rther information	on concerning this ma	tter, please call:	
MERE	EDITH MANIATT	Y	at (²⁰³	863-0631
	(Name of Conta	et Person)	(Area Code	and Daytime Telephone Number)
Enclo	sed is a check f	or the following amou	int:	
☐ \$52	2.50 Filing Fee	S61.25 Filing Fee and Certificate of Status	S105.00 Filin and Certified	
	ng Address:			Address:
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		
			Tallaha	issee. FL 32303

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

FIED 2022 DEC 27 AM 10: 27 SECRED STATE TALLAHASSEE, FL

PROVEDA II LIMITE	DPARTNERSHIP
(Nam	e of foreign limited partnership or limited liability limited partnership)
B19000000281	
	(Florida Document Number of the Foreign LP or LLLP)
DELAWARE	
	(Jurisdiction of formation)
11/15/2019	
	(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: 12/31/2022 (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:

DocuSigned by: -L.W C48875E10BA44A8 Typed or printed name: LLOYD HASCOE, PRESIDENT OF GP, HFC II, INC.

Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8,75