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(((H24000085752 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITAL LEGAL GROUP PA

Account Number : 120210000025 Phone : (305)676-0924 Fax Number : (305)676-0924

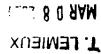
# DISS/TERM/CANCEL/REV OF LP/LLP

## CARROLLWOOD SPV VI, LP

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$52.50

Electronic Filing Menu Corporate Filing Menu

Help



#### From: Lauren Shapiro

#### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT Carrollwood SPV Vi, LP	
	Partnership or Limited Liability Limited Partnership)
The enclosed Notice of Cancellation	on and fee(s) are submitted for filing.
Please return all correspondence co	neerning this matter to:
Lauren Shapiro	
(Contact Perse	on)
Capital Legal Group PA	
(Firm/Compa	ny)
1110 Brickell Avenue, Suite 505	
(Address)	
Miami, FL 33131	
(City, State and Zi	p Code)
For further information concerning	this matter, please call:
Lauren Shapiro	at () 578-7864
(Name of Contact Person)	(Area Code and Daytime Telephone Number)
Enclosed is a check for the following	ng amount:
■ \$52.50 Filing Fee S61.25 Filing and Certific Status	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

H24000085752.3

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

Carrollwood SPV VI. LP		
(Name of foreign limited p	partnership or limit	ed liability limited partnership)
B23000000104		
(Florida Docume	ent Number of the f	Foreign LP or LLLP)
Delaware		
(1)	urisdiction of form	ation)
April 7, 2923		
(Date author	rized to transact bus	iness in Florida)
This foreign limited partnership or litransacting business in Florida and 5, 620,1907, F.S.		limited partnership is no longer lits certificate of authority pursuant to
This entity appoints the Florida Deprights of action arising out of the tra		e as its agent for service of process for iness 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
NOTE: If the date inserted in this requirements, this date will not be I Department of State's records.		
Signature of a general partner:		
Victor Bonilla		_
Typed or printed name:		
Victor Bonilla		yo ,
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75	