B23000000281

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	-
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	J. HORN	E
	FEB - 3 2	

Office Use Only



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2025 JAN 31 AM II: 54 SECRETARY OF STATE LATEAUSSEE, FLORIDA

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ii5 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

If there are any issues please contact Cheyanne at 850-202-1882

Date:	01/31/2025	
Name:	Cheyanne Davis	_
Reference a	#:2635081	
Entity Name	e: ANNAPURNA CAI	PITAL MANAGEMENT LP
Artic	eles of Incorporation/Authorization	n to Transact Business
☐ Ame	endment	
Chai	nge of Agent	
☐ Rein	nstatement	
Con	version	
☐ Merg	ger	
✓ Diss	olution/Withdrawal	
Fiction	tious Name	
✓ Othe	er PLEASE ATTACH CERT. CO	DPY AND CERT. OF STATUS UPON FILING
Authorized	Amount: \$113.75	
Signature:	(Oruma Paine	

F: 800.944.6607

F: +852.2682.9790



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301

P: 866.625.0838 F: 866.625.0839

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Account#: 120000000088 If there are any issues please contact Patrice at 850-202-9071

Date:	01/31/2025	
Name:	Cheyanne Davis	
Reference #:	2635081	
Entity Name:	ANNAPURNA CAPI	TAL MANAGEMENT LP
Article	es of Incorporation/Authorization t	o Transact Business
☐ Amen	dment	
☐ Change of Agent		
Reins	tatement	
☐ Conve	ersion	
☐ Merger		
✓ Disso	lution/Withdrawal	
☐ Fictition	ous Name	
✓ Other	PLEASE ATTACH CERT. COP	Y AND CERT. OF STATUS UPON FILING
Authorized A	Amount: \$113.75	
Signature:	Oryma Paire	

COVER LETTER

TO:	Registration ! Division of C				
	Annanur	na Capital Management LF)		
SUBJ	T.C.I.	Foreign Limited Partnershi		tv Limited	l Partnership)
		-	•		
The e	nclosed Notice	of Cancellation and fo	e(s) are submitt	ed for fil	ing.
Please	e return all corr	espondence concernin	g this matter to:		
Marcia	a Sofley			_	
		(Contact Person)	-		
Schult	e Roth and Zabel			_	
		(Firm/Company)			
919 TI	hird Avenue			_	
		(Address)			
New Y	ork, NY 10022			_	
	(City, State and Zip Code)			
For fu	ırther informati	on concerning this ma	tter, please call:		
Marci	a Sofley		at (212	756-200	00
	(Name of Conta	act Person)		and Day	time Telephone Number)
Enclo	sed is a check	for the following amou	int:		
	2.50 Filing Fee	S61.25 Filing Fee and Certificate of Status	S105.00 Filir and Certified	_	S113.75 Filing Fee, Certified Copy, and Certificate of Status
Regis Divis P.O. I	ng Address: tration Section ion of Corpora Box 6327 hassee, FL 323	tions	Regist Division The Co 2415 N	entre of	ection rporations Tallahassee oe Street, Suite 810

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

Annapu	rna Capital Management LP
(Name of foreign limited p	eartnership or limited liability limited partnership)
	B23000000281
(Florida Docume	ent Number of the Foreign LP or LLLP)
	Delaware
(J1	urisdiction of formation)
	September 1, 2023
(Date authori	ized to transact business in Florida)
	limited liability limited partnership is no longer wishes to cancel its certificate of authority pursuant to
This entity appoints the Florida Deprights of action arising out of the tra	partment of State as its agent for service of process for insaction of business in this state.
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 is filed by the Florida
	block does not meet the applicable statutory filing isted as the document's effective date on the
Signature of a general partner:	
Typed or printed name:	
Antoine Tan	
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75