1397000000402

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
!				



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SECRETARY OF STATE

Office Use Only



JAYMIE MCDOUGAL Administrative Assistant Phone: 317.685.7371 Fax: 317.685-7213 jmcdougal@simon.com

April 9, 2009

Via FedEx

Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

RE: Certificate of Cancellation

To Whom It May Concern:

Please find enclosed the following documents for filing with the Florida Department of State:

• Certificate of Cancellation – SD Dadeland Limited Partnership (Document #B9700000402)

Please call me if you have any questions. Thank you.

Sincerely,

Jaymie McDougal

/jam

Enclosures

TRANSMITTAL LETTER

TO:	Registration S Division of Co			
SUBJE	CT: SD Dade	land Limited Partnership		
		(Name o	f Limited Partnership)	
DOCU	MENT NUMB	ER: <u>B97000000402</u>		
The end	closed Certificat	e of Cancellation and fee(s) are s	submitted for filing.	
Please	return all corres	pondence concerning this matter	to the following:	
		Tracy L. Reinholt		
		()	Name of Person)	
	C: D	t C		
	Simon Pi	roperty Group (Firm/Company)	
	225	W. Washington St., P.O. Box 7	(Address)	
			(Address)	
	1	Indianapolis, IN 46207-7033		
	_	(City/	'State and Zip Code)	
For fur	ther information	concerning this matter, please c	all:	
	Tracy L. Rein	holt	at (317) 263-7131	
		(Name of Person)	at (317) 263-7131 (Area Code & Daytime	Telephone Number)
		the following amount:		
\$52.	.50 Filing Fee	☐ \$61.25 Filing Fee & Certificate of Status	□ \$105.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$113.75 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		EET ADDRESS:	MAILING ADDRE	:SS:
Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399		sion of Corporations	Registration Section Division of Corporat	ions
			P.O. Box 6327 Tallahassee, Florida 32314	

TO:

CERTIFICATE OF CANCELLATION FOR

SD Dadeland Limited Partnership		
(Insert name currently on file with Florida Dept. of State)		
Pursuant to the provisions of section 620.113, Florida Statutes, this Florida limit	ted partnership, whose	
certificate was filed with the Florida Department of State on 08/05/1997	, hereby submits this	
Certificate of Cancellation.		
FIRST: Reason for cancellation: (State why partnership is submitting cancella The entity is no longer doing business in the State of Florida.	ition)	
	09 APR 13 AM IO: 31 SECRETARY OF STATE TALLAHASSEE FLORIDA	
SECOND: This Certificate of Cancellation shall be effective at the time of its f Department of State.	iling with the Florida	
THIRD: Signatures of all general partners:		
By: James A. Schmidt, Assistant Secretary	•	