

Florida Department of State

Division of Corporations

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : PCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

DISS/TERM/CANCEL/REV OF LP/LLP

SOUTH ATLANTIC PRIVATE EQUITY FUND IV (QP),

LIMITED

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$52.50

RECEIVED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SOUTH ATLANTIC PRIVATE EQUITY FUND IV (QP), LIMITED PARTNERSHIP
(Name of Foreign Limited Partnership or Limited Liability Limited Partnership)

The enclosed Notice of Cancellation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Alison Callahan

(Contact Person)

Goodwin Procter LLP

(Firm/Company)

53 State Street

(Address)

Boston, MA 02109

(City, State and Zip Code)

For further information concerning this matter, please call:

Linary Hewes

(Name of Contact Person)

at (617)

531-5817

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$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:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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12 DEC 13 AM 11:28
TALLAHASSEE, FLORIDA
CLERK OF STATE

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

SOUTH ATLANTIC PRIVATE EQUITY FUND IV (QP), LIMITED PARTNERSHIP
(Name of limited partnership or limited liability limited partnership)

DELAWARE
(Jurisdiction of formation)

B99000000072
(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: _____
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Signature of a general partner:



Typed or printed name:
SOUTH ATLANTIC PRIVATE EQUITY PARTNERS IV,
LIMITED PARTNERSHIP

Filing Fee: \$52.50
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75

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TALLAHASSEE, FLORIDA

LYBC:4678262.1.

FL001 - 12/20/09 E. T. Systems, Inc.