

DD60000000010

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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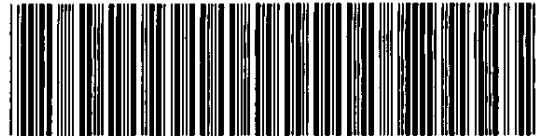
(Business Entity Name)

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DEPARTMENT OF REVENUE  
16 JUN 10 AM 11:26  
STATE OF MISSISSIPPI  
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Trust  
W.D

JUN 14 2016  
R. WHITE

CT Corporation System

515 E Park Avenue, Tallahassee, FL, 32301 850-222-1092

COLE CV HAINES CITY FL DST

D06000000010



**\*RE-SUBMIT\***

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Nonprofit

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Amendment

Dissolution/Withdrawal

Reinstatement

Annual Report

Name Registration

Fictitious Name

Photocopies

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6/10/2016

**KM**

Merger

Mark

Other

UCC

CUS

After 4:30

Pick Up

Order#:

**10044016**

Ref#:

Amount: \$

CT Corporation System

515 E Park Avenue, Tallahassee, FL, 32301 850-222-1092

COLE CV HAINES CITY FL DST

D06000000010

[Empty box]

Nonprofit

Foreign

Limited Partnership

LLC

Certified Copy

Call When Ready

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Examiner \_\_\_\_\_

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W.P. Verifier \_\_\_\_\_

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UCC

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After 4:30

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Order#:

**10044016**

Ref#:

Amount: \$



June 10, 2016

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

COLE CV HAINES CITY FL DST  
2555 E CAMELBACK ROAD  
SUITE 400  
PHOENIX, AZ 85016

SUBJECT: COLE CV HAINES CITY FL DST  
REF: D06000000010

**\*RE-SUBMIT\***

Please retain original filing  
date of submission 6/9

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

When you file a withdrawal of foreign trust, you must mail it in or walk it in with a check. You can not use your account to pay for the withdrawal of a trust.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis  
Regulatory Specialist II

FAX Aud. #: H16000141741  
Letter Number: 116A00012244

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Cole CV Haines City FL DST  
(Name of Corporation)

**DOCUMENT NUMBER:** D06000000010

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State and Zip code)

For further information concerning this matter, please call:

\_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

- \$35 Filing Fee
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed)
- \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**MAILING ADDRESS:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL.32314

**STREET ADDRESS:**  
Amendment Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL. 32301

APPLICATION BY FOREIGN <sup>Business Trust</sup> FOR WITHDRAWAL OF  
AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

Cole CV Haines City FL DST

(Name of Corporation)

D06000000010

(Document Number of Corporation (if known))

Delaware

(Incorporated Under Laws of)

This <sup>Business</sup> Trust no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This <sup>Business</sup> Trust revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address for the <sup>Business</sup> Trust:

2325 E. Camelback Rd., Suite 1100

(Mailing Address)

Phoenix, AZ 85018

(City/ State /Zip)

RECEIVED  
STATE OF FLORIDA  
FALL 2016  
16 JUN -9 AM 10:26  
F 110001

The <sup>Business Trust</sup> ~~corporation~~ agrees to notify the Department of State in the future of any change in its mailing address.

COLE CV Haines City FL DST, a Delaware statutory trust  
By: Equity Fund Advisors, Inc., an Arizona corporation  
not in its individual capacity, but solely as the Manager of such trust

By: [Signature]  
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

June 8, 2016

(Date)

Todd J. Weiss

(Typed or printed name of person signing)

Authorized Person

(Title of person signing)

FILING FEE \$35