

D120000000009

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

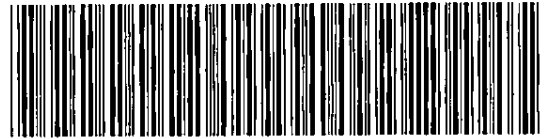
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700403988627

Withdrawal of
Declaration of
Trust

03/10/23--01002--007 **210.00

2023 MAR -8 AM 9:21
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED

A. RAMSEY

MAR 10 2023



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 9, 2023

CT CORP

TALLAHASSEE, FL 32312

SUBJECT: JACKSONVILLE MOBILE II DST
Ref. Number: D12000000009

CORRECTED
Please Allow For
Same File Date

We have received your document for JACKSONVILLE MOBILE II DST and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

A withdrawal of declaration of trust can not be filed using your Dept of State account. Please return this document with a check for \$35.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Annette Ramsey
OPS

Letter Number: 623A00005509

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312
850-656-4724

Date: 03/08/2023

Acc#I20160000072

en: c DW

Name:	Jacksonville Mobile II DST
Document #:	
Order #:	14822043 - 7

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input type="checkbox"/>
	Plain: <input checked="" type="checkbox"/>
	COGS: <input type="checkbox"/>

Email Address for Annual Report Notifications:

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Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ 35.00

Thank you!

APPLICATION BY FOREIGN STATUTORY TRUST FOR WITHDRAWAL OF
AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

Jacksonville Mobile II DST

(Name of Trust)

D12000000009

(Document Number of Trust (if known))

Delaware

(Incorporated Under Laws of)

This Trust is 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 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 Trust:

2901 Butterfield Road

(Mailing Address)

Oak Brook, Illinois 60523


(City/State/Zip)

Jacksonville Mobile II DST, a Delaware statutory trust

By: National Retail Portfolio V Exchange, L.L.C., a Delaware limited liability company, its signatory trustee

By: Inland Private Capital Corporation, a Delaware corporation, its sole member

The Trust agrees to notify the Department of State in the future of any change in its mailing address.


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

March 7, 2023

(Date)

Venton J. Carlston

(Typed or printed name of person signing)

Vice President of

(Title of person signing)

sole member of signatory trustee

FILING FEE \$35

FILED
2023 MAR -8 AM 9:21
CLERK OF STATE
TALLAHASSEE, FLORIDA