

F23000006397

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

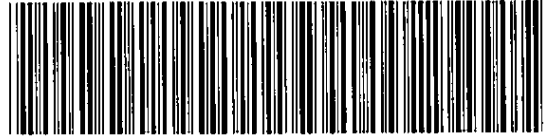
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200424291162

Withdrawal

FILED  
2024 FEB 22 AM 10:09

A. RAMSEY  
FEB 23 2024

RECEIVED  
2024 FEB 22 AM 11:29  
TALLAHASSEE, FLORIDA

FILE 1ST



CSC - Tallahassee  
1201 Hays Street  
Tallahassee, FL 32301-2607  
850-558-1500, Ext:

To: Department Of State, Division Of Corporations  
From: Shauna Godbolt  
Ext:  
Date: 02/22/24  
Order #: 1425989-1  
Re: Fairview Housing Partners Ltd.  
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Withdrawal

Application for Certificate of Authority

Amount to be deducted from our State Account: \$35.0 - FL State Account Number:  
I20000000195

auth

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Fairview Housing Partners Ltd.

\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** F23000006397

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

Please return all correspondence concerning this matter to the following:

Victoria Russell

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

Fairview Housing Partners Ltd.

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

680 5th Avenue, 17th Floor

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

New York, NY 10019

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

For further information concerning this matter, please call:

Victoria Russell

at ( 516 ) 724-7348

\_\_\_\_\_  
(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  
The Centre of Tallahassee  
511 E. North  
Tallahassee, FL 32301

**APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF  
AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA**

Fairview Housing Partners Ltd. Corp.

(Name of Corporation)

F23000006397

(Document Number of Corporation (if known))

11/13/2023

(Incorporated Under Laws of and date authorized to transact business/conduct its affairs)

FILED  
2024 FEB 22 AM 10:09  
CLERK OF THE COURT  
JUDICIAL CIRCUIT IN AND FOR  
THE NINTH JUDICIAL CIRCUIT  
IN FLORIDA

This corporation 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 corporation 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 corporation:

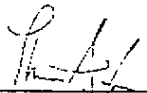
680 5th Avenue, 17th Floor

(Mailing Address)

New York, NY 10019

(City/ State /Zip)

The corporation 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)

02/21/2024

(Date)

Thom Amdur

(Typed or printed name of person signing)

Executive Director

(Title of person signing)

**FILING FEE \$35**