Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170003115003)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations Fax Number : (858)617-6383 From: Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 : (512)418-6949 Phone : (954)208-0845 Fax Number

LLC DISSOLUTION OR WITHDRAWAL SBAF MORTGAGE FUND I/HOLDING - 540 WEST MADISON LLC

Electronic Filing Menu — Corporate Filing Menu

| Certificate of Status | 0 | | |
|-----------------------|---------|--------------------------|-------------|
| Certified Copy | 0 | | |
| Page Count | 03 | ₹ | 2 |
| Estimated Charge | \$25,00 | SEC | 017 |
| | | SECRETARY TALLAHASSET | 2017 NOV 28 |
| | | TAR ASS | 12 |
| | | <u>M</u> A | |
| | |)F S | 3 |

COVER LETTER

| TO: | Registration Section |
|-----|--|
| | Division of Corporations |

SUBJECT: SBAF Mortgage Fund I/Holding - 540 West Madison LLC
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

| Robert Roepsch | |
|---------------------------------|--------------------------|
| | (Name of Person) |
| Principal Global Investors, LLC | |
| | (Firm/Company) |
| 801 Grand Avenue | |
| | (Address) |
| Des Moines, IA 50392-0490 | |
| ((| City/State and Zip Code) |

For further information concerning this matter, please call:

Robert Roepsch

at (575

283-5508

Name of Person)

(Area Code & Daytimé Telephone Number)

Enclosed is a check for the following amount:

☐ \$25,00 Filing Fee and Certificate of Dissolution

□ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

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

FILED 2017 NOV 28 PM 12: 32 SECRETARY OF STATE FALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| ١. | The name of a limited liability company is SBAF Mortguge Fund I/Holding - 540 West Madison LLC | | | | |
|-----------|---|--|--|--|--|
| 2. | The Articles of Organization | | | | |
| | document number L1300000 | | | | |
| 3. | The delayed effective date the dissolution if not effective on the date of filing: (effective date cannot be prior to or more than 90 days later than date document is received for filing) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not listed as the document's effective date on the Department of State's records. | | | | |
| 4. | A description of occurrence 605.0707, Florida Statutes, (| that resulted in the limi copy 605.0707 on back | ited liability company's dissolution pursuant to section cover letter). | | |
| • | Upon consent or agreement of | the member pursuant to Se | ection 605.0797 (2), Florida Statutes | | |
| | | | | | |
| | · · · · · · · · · · · · · · · · · · · | | | | |
| | | | | | |
| | | | | | |
| 5. | If there are no members, entactivities and affairs: | er the name and address SBAF Mortgage Fund I | s of the person appointed to wind up the company's //Holding, LLC | | |
| | · | c/o Principal Real Estate | e Investors, LLC | | |
| | | 801 Grand Ave. Des Me | oines, IA 50392 | | |
| | | | | | |
| 6. lis | Signature of an authorized pasted above to wind up the con | person or if there are no npany's activities and a | members, the signature of the person appointed and ffairs: Robert G. Roepsch RE Equity Administrator | | |
| | The Man | AND THE PARTY OF T | Authorized person | | |
| _ | Signature | · · · · · · · · · · · · · · · · · · · | Printed Name | | |

FILING FEE: \$25.00