

L22000088642

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

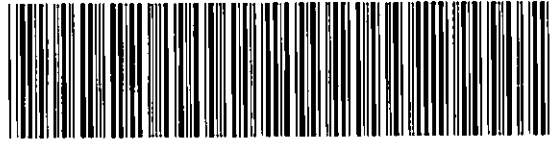
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
MAR - 8 2023

Office Use Only



100399479151

2023 MAR - 7 AM 9:26
SECRETARY OF
TALLAHASSEE, FLORIDA

RECEIVED
2023 MAR - 7 PM 4:07
CLERK OF THE
TALLAHASSEE, FLORIDA



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 120000000088

Date: 03/07/2023

Name: Greg Pintacuda

Reference #: 1931605

Entity Name: REAL ESTATE PLUS FUND REIT LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☒ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other _____

Authorized Amount: \$25

Signature: 



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FILED

2023 MAR -7 AM 9:28

SECRETARY OF
TALLAHASSEE

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Real Estate Plus Fund REIT LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

20 January 2022

(Date registered with Florida Department of State)

L22000088642

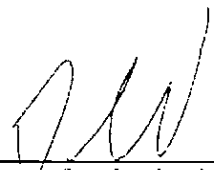
(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

Effective Date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.



(Signature of authorized representative)

David Hamm

(Typed or printed name of signee)

Filing Fee: \$25.00

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Real Estate Plus Fund REIT LLC
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

AnnMarie Imparato

(Name of Person)

Wafra Inc.

(Firm/Company)

345 Park Avenue, 41st Floor

(Address)

New York, NY 10154

(City/State and Zip Code)

For further information concerning this matter, please call:

David Hamm

(Name of Person)

at (212) 7593700

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy