

MO5000000861

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

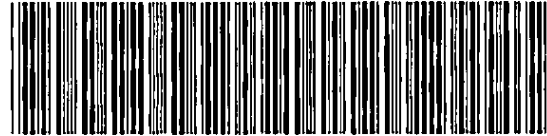
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



500307176445

MO5-861  
Withdrawal

N. CAUSSEAU

DEC 29 2017

47 DEC 29 PM 11:02

PM DEC 29 PM 1:17

RECEIVED

RECEIVED

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 9860777 5138497

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : December 28, 2017

ORDER TIME : 9:14 AM

ORDER NO. : 986077-010

CUSTOMER NO: 5138497

FOREIGN FILINGS

NAME: REALTY ASSOCIATES FUND VII LLC

☐ CORPORATE  
☐ LIMITED PARTNERSHIP  
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY  
☒ PLAIN STAMPED COPY  
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Roxanne Turner - EXT#

EXAMINER: \_\_\_\_\_

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Realty Associates Fund VII 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:

Jennifer Symmis

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

TA Realty LLC

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

28 State Street, 10th Floor

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

Boston, MA 02109

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

For further information concerning this matter, please call:

Jennifer Symmis

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

at ( 617 ) 476-2797  
\_\_\_\_\_  
(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

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Realty Associates Fund VII LLC

(Name of limited liability company)

MA

(Jurisdiction of its organization)

02/16/2005

(Date registered with Florida Department of State)

M05000000861

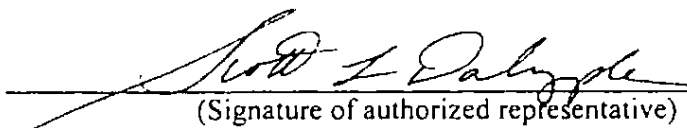
(Florida Document Number)

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)

Scott L. Dalrymple

(Typed or printed name of signee)

Filing Fee: \$25.00

REC'D DEC 29 PM 1:17

RECEIVED  
DIVISION OF CORPORATE  
REGISTRATION