M06000002661

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



400292969164

16 DEC 16 AM 8: 26 DIVISION OF PARKS AM 8: 26

O-SIMMONS DEC 1 9 2016 CORPORATION SERVICE COMPANY
1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 426277 5138497

AUTHORIZATION : COST LIMIT : \$25.00

ORDER DATE : December 16, 2016

ORDER TIME : 3:57 PM

DOMESTIC FILINGS

NAME: GATEWAY C FUND VII LLC

ORDER NO. : 426277-030

CUSTOMER NO: 5138497

<u>XX</u> A	RTICLES OF	DISSOLUTIO	'N			
PLEASE I	RETURN THE	FOLLOWING	AS PROOF	OF :	FILING:	
XX	CERTIFIED PLAIN STAM CERTIFICAT		STANDING			
CONTACT	PERSON: 0	Courtney Wi	lliams -	EXT	# 62935	
			EXAMINE	ER'S	INITIALS:	

COVER LETTER

	istration Section sion of Corporations				
SUBJECT:	Gateway C Fun	id VII, LLC			
(Name of Foreign Limited Liability Company)					
Dear Sir or N	fadam:				
The enclosed	withdrawal and fee(s	s) are submitte	d for filing.		
Please return	all correspondence c	oncerning this	matter to the following	3:	
Jennifer S	Syrmis				
	(Name o	of Person)		-	
TA Realty	LLC				
***	(Firm/C	ompany)		-	
28 State S	Street, 10th Floo	r			
	(Addres	s)		-	
Boston, M	1A 02109				
	(City/Sta	ate and Zip Cod	e)	_	
For further in	formation concerning	g this matter, p	lease call;		
Jennifer S	Syrmis		617	476-2797	
	(Name of Person)			Daytime Telephone Number)	
Reg Divi Cliff 266	SEET/COURIER AI istration Section sion of Corporations on Building I Executive Center Co ahassee, Florida 3230	ircle	Regis Divis P.O. I	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, Florida 32314	
Enclosed is a	check for the follow	ving amount:			
□ \$25 Filing		ng Fee & ate of Status	S55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy	

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Galeway C Fullo VII, LL	.C		
	(Name of limited liability company)		
DE			
	(Jurisdiction of its organization)		
05/12/2006	(can-1		
	Date registered with Florida Department of State)	 _	
M06000002661			
	(Florida Document Number)		
This limited liability comp	any is withdrawing its certificate of authority in this state).	
	Swort Delingte		
	(Signature of authorized representative)	<u> </u>	
Scott L. D	alrymple	6 DE	
	(Typed or printed name of signee)	DEC	
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		16 DEC 16 AM 8:	ţ

Filing Fee: \$25.00