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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614) 280-3339  
Fax Number : (954) 208-0845

2016 NOV 28 A 9:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**LLC DISSOLUTION OR WITHDRAWAL  
HARVEST GENERAL PARTNER I LLC**

Certificate of Status	0
Certified Copy	1
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D. BRUCE  
NOV 29 2016

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Harvest General Partner I 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:

Leah Kuor

(Name of Person)

Harvest General Partner I LLC

(Firm/Company)

5885 Meadows Rd., Ste 500

(Address)

Lake Oswego, OR 97035

(City/State and Zip Code)

For further information concerning this matter, please call:

Leah Kuor

(Name of Person)

503

at ( )

586-7309

(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

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## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Harvest General Partner I LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

02/28/2007

(Date registered with Florida Department of State)

M07000001202

(Florida Document Number)

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



(Signature of authorized representative)

Leah Kuor, Assistant Secretary

(Typed or printed name of signee)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2016 NOV 28 A 9 29

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Filing Fee: \$25.00