Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

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Fax Number : (850)617-6383

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

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Fax Number

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LLC DISSOLUTION OR WITHDRAWAL IA ST FLORIDA PORTFOLIO IV, L.L.C.

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	C	OVER LETTER	
TO: Registration Division of	n Section Corporations		
SUBJECT: 1A ST	Florida Portfolio IV, L.L.C. (Name of Fo	relgn Limited Llability (Сотрану)
Dear Sir or Madam:			
The enclosed withdr	awai and fee(s) are submitte	d for filing.	
Please return all corr	espondence concerning this	matter to the following	:
Kim Band			
	(Name of Person)		
IA ST Florida Portf	olio IV, L.L.C. (Firm/Company)		
	(* **** * **** * **** * * * * * * * * *		
2809 Butterfield Ro	_		
Oak Brook, IL 6052	(Address)		
	(City/State and Zip Cod	le)	
For further informati	on concerning this matter, p	olease call:	
Kim Band		630 at (570-0854
(N	ame of Person)	(Area Code &	Duytime Telephone Number)
Registration Division of Clifton Buil 2661 Execu	Corporations	Regist Divisio P.O. B	JNG ADDRESS: ration Section on of Corporations tox 6327 assee, Florida 32314
Enclosed is a check	for the following amount:		
\$25 Filing Fee	☐ \$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	S60 Filing Fee, Certificate of Status & Certified Copy

11/30/2015 10:08:44 AM From: To: 8506176383(3/3)

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

IA ST Florida P	ortfolio IV, L.L.C.	
· · · · · · · · · · · · · · · · · · ·	(Name of limited liability company)	
Delaware		
	(Jurisdiction of its organization)	
1/18/2008		
	(Date registered with Florida Department of State)	
M08000000321		
	(Florida Document Number)	
This limited li	ability company is withdrawing its certificate of authority in this state.	
·	52/h	
	(Signature of authorized representative)	
	Robert J. Lange, Vice President, InvenTrust Properties Corp., member	
	(Typed or printed name of signee)	

Filing Fee: \$25.00