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COVER LETTER

то:	_	istration S ision of C	Section ' Corporations					
SUBJE	ECT:	TSRE	III Assured Self Stor	rage, LLC				
SUBUL			(Name of For	eign Limited Liability	Company)			
Dear Si	ir or N	//adam:						
The end	closec	l withdray	val and fee(s) are submitte	d for filing.				
Please	return	all corre	spondence concerning this	matter to the followin	g:			
Jenni	ifer \	Villiams	3					
			(Name of Person)		_			
Virtus	s Re	al Estat	te Capital					
			(Firm/Company)		_			
7004	Bee	Cave	Road Bldg 3-300					
			(Address)		_			
Austi	n, Te	exas 78	3746					
			(City/State and Zip Cod	e)	_		: 5	
For furt	ther in	nformatio	n concerning this matter, p	lease call:				
Jenni	ifer \	Villiams	S	512	891-1262		20	
		(Nar	ne of Person)		& Daytime Telephone N	:	رب ج	
	Reg Div Clif 266	istration S ision of C lon Build I Executi	Corporations	Regi Divis P.O.	ILING ADDRESS: stration Section sion of Corporations Box 6327 shassee, Florida 32314	ATE RIDA	20 S	
Enclose	ed is	a check f	or the following amount:					
'⊠ \$25	Filing	g Fee	□ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	Sectificate of S Certificate Copy	tatus &		

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

TSRE III Assured Self Storage, LLC
(Name of limited liability company)
Mississippi
(Jurisdiction of its organization)
September 16, 2010
(Date registered with Florida Department of State)
M1000003409
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
flotis-
(Signature of authorized representative)
Robert Schweizer
(Typed or printed name of signee)

Filing Fee: \$25.00