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| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Coomoo Dian, Name, |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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DEPARTMENT OF STATE



ACCOUNT NO. : I2000000195 REFERENCE : 427923 4303194 AUTHORIZATION : ! COST LIMIT : ORDER DATE: December 18, 2014 ORDER TIME : 9:12 AM ORDER NO. : 427923-010 CUSTOMER NO: 4303194 FOREIGN FILINGS NAME: NFR ECP I - 3319 DOWNTOWN LAKELAND, LLC CORPORATE LIMITED PARTNERSHIP XXX LIMITED LIABILITY COMPANY XXXX WITHDRAWAL/CANCELLATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF STATUS CONTACT PERSON: Courtney Williams - EXT# 62935

EXAMINER:

COVER LETTER

| | gistration Section rision of Corporations | | | | | |
|---------------------------|--|---|---|---------------------------------|----------|--|
| SUBJECT: | NFR ECP I - 3319 DOWN | TOWN LAKELAN | ID, LLC | | | |
| | (Name of For | reign Limited Liability | Company) | | | |
| Dear Sir or N | Madam: | | | | | |
| The enclosed | d withdrawal and fee(s) are submitted | d for filing. | | | | |
| Please return | all correspondence concerning this | matter to the following | 5. 3. | | | |
| Vincent E | E. Pellerito | | | | | |
| | (Name of Person) | | _ | | | |
| National | Financial Realty | | | | 29 | |
| | (Firm/Company) | | - | | O3O M | |
| 21250 Ha | awthorne Blvd., Suite 700 | | | ASSE | 913 | |
| | (Address) | | - | | * | |
| Torrance | , CA 90505-5514 | | | 180 180 181 181 181 | = | |
| | (City/State and Zip Cod | e) | | | · 65 | |
| For further is | nformation concerning this matter, p | lease call: | | | | |
| Vincent E | E. Pellerito | 310 at (| 791-7722 | | | |
| | (Name of Person) | | Daytime Telephone Number) | | | |
| Reg Div Clit 266 | REET/COURIER ADDRESS: gistration Section vision of Corporations fton Building b1 Executive Center Circle lahassee, 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 | g Fee S30 Filing Fee & Certificate of Status | S55 Filing Fee & Certified Copy | ☐ \$60 Filing Fee, Certificate of Status & | | | |

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

| NFR ECP I - 3319 DOWNTOWN LAKELAND, LLC | | | |
|---|---|-----------|--|
| (Name of limited liability company) | | | |
| Delaware | | | |
| (Jurisdiction of its organization) | | | |
| 02/22/2013 | | | |
| (Date registered with Florida Department of State) M13000001159 | | 2014 | |
| (Florida Document Number) | # 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | DEC | |
| This limited liability company is withdrawing its certificate of authority in this state. | | :11 NA 61 | |
| (Signature of authorized representative) | 5 | [] | |
| See Schedule 1 attached hereto | • | | |
| (Typed or printed name of signee) | | | |

Filing Fee: \$25.00

Schedule 1 to

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

National Financial Realty - East Coast Portfolio I, LLC, a Delaware limited liability company, Its Member

By:

NFR Master Lease GAP, LLC, a Delaware impited liability company,

Its Managing Membery

By: _

Print Name: Darole Smith

Title:

Authorized Signatory

Print Name: Brad Weinberg
Authorized Signatory

Title: ___