

MI3D000007873

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

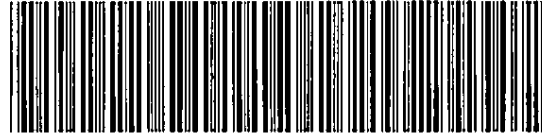
(Business Entity Name)

(Document Number)

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CLERK, COUNTY OF DADE
TALLAHASSEE, FL

DEC 20

S. PRATHER

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 555667 7814304

AUTHORIZATION : 

COST LIMIT : \$ 25.00

ORDER DATE : December 21, 2018

ORDER TIME : 1:30 PM

ORDER NO. : 555667-075

CUSTOMER NO: 7814304

FOREIGN FILINGS

NAME: CH REALTY VI/MF ORLANDO LAKE
EVE, L.L.C.

____ CORPORATE
____ LIMITED PARTNERSHIP
XX 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: Roxanne Turner - EXT#

EXAMINER: _____

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

CH Realty VI/MF Orlando Lake Eve, L.L.C.

(Name of limited liability company)

State of Delaware

(Jurisdiction of its organization)

December 12, 2013

(Date registered with Florida Department of State)

M13000007873

(Florida Document Number)

2018 DEC 21 AM 9:35
TALLAHASSEE, FL
FILING

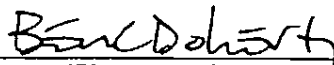
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This limited liability company is withdrawing its certificate of authority in this state.

Effective Date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.



(Signature of authorized representative)

Ben C. Doherty, Vice President of Fund VI Managers, L.L.C., Manager of
CH Realty VI/MF Orlando Lake Eve, L.L.C.

(Typed or printed name of signee)

Filing Fee: \$25.00