M14 6600000818

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	

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DEPARTMENT OF STATE

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٥	ACCOUNT NO. : 12000000195		
	REFERENCE : 380344 7604215		
	AUTHORIZATION: Louis le man		
	COST LIMIT : \$ 23.00		
	ORDER DATE: November 17, 2014		
	ORDER TIME : 9:05 AM		
	ORDER NO. : 380344-015	So	201
	CUSTOMER NO: 7604215	E SEE	四下
	FOREIGN FILINGS		- 18 - 22 - 24 - 24
	NAME: GP SAN JOSE BLVD JACKSONVILLE FL LANDLORD, LLC	igen Gen Te	Ü
	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

TO: Registration Division of	n Section Corporations			
GP S	San Jose Blvd Jackson	nville FL Landlord	, LLC	•
SOBSECT.	(Name of For	eign Limited Liability (Company)	
Dear Sir or Madam:	· ,		. :	
The enclosed withdr	awal and fee(s) are submitted	d for filing.		TAS BY
	respondence concerning this			SECRETA
			••	の語で
Karen King				inion 💯
	(Name of Person)			9.5
SunTrust Equit	y Funding, LLC			••.
	(Firm/Company)	· · · · · · · · · · · · · · · · · · ·	•	
3333 Peachtre	e Road, 10th Floor			
	(Address)		·	
Atlanta, Georgi	a 30326			
	(City/State and Zip Cod	e)		
For further informat	ion concerning this matter, p	lease call:		
Karen King		404	439-7662	
(N	ame of Person)		Daytime Telephone Number)	
Registration Division of Clifton Bui 2661 Exect	Corporations	Regist Divisi P.O. B	ING ADDRESS: ration Section on of Corporations sox 6327 assee, Florida 32314	
Enclosed is a check	for the following amount:			
□ \$25 Filing Fee	S30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy	5.3

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

	(Name of limited liability company)	<u> </u>
	• • •	
Delaware		ភេទ
	(Jurisdiction of its organization)	((c)
02/05/2014		<u>1524</u>
(Date registered with Florida Department of State)	
M14000000818		
	(Florida Document Number)	
This limited liability comr	oany is withdrawing its certificate of authority in this s	state.

(Signature of authorized representative)
Allison McLeod

(Typed or printed name of signee)

Filing Fee: \$25.00