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(Requestor's Name)						
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J. Goldwers MAR 1 6' WIR

COVER LETTER

TÓ:

TO: Registr Divisid		Section ; orporations	* *				
SUBJECT:	Exch	angeRight Net Leased (Name of Fo			(Company)		
		(Name of Pol	cigii Lillinc	u Liaomity	Company)		
Dear Sir or Mad	dam:						
The enclosed wi	ithdrav	val and fee(s) are submitte	d for filing.				
Please return all	l corres	spondence concerning this	matter to th	e followin	ng:		
	Jen	nifer Chase					
		(Name of Person)			_		
E	xchan	geRight Real Estate, I	.LC				
	·-	(Firm/Company)					
	251 5	S. Lake Avenue, Suite	520				
,		(Address)			_		
		Pasadena, CA 911	.01				
		(City/State and Zip Cod	le)				
For further infor	rmatio	n concerning this matter, p	lease call:				
Jennifer (Chase	2	at (855	317-4448		
	(Nan	ne of Person)	(,	Area Code	& Daytime Telephone Number)		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a cl	heck fo	or the following amount:					
☑ \$25 Filing Fe	ee	□ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy		□ \$60 Filing Fee, Certificate of Status & Certified Copy		

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

ExchangeRight Net Leased Portfolio 6, LLC			
(Name of limited liability company)			_
Iowa			
(Jurisdiction of its organization)			
March 27, 2014			
(Date registered with Florida Department of State)			_
M1400002079			
(Florida Document Number)	·		_
This limited liability company is withdrawing its certificate of authority in this sta	ıte.		
(Signature of authorized representative) Warren Thomas, Managing Member (Typed or printed name of signee)		15 MAR -2	September of the septem
	THE STATE	AM 10: 55	

Filing Fee: \$25.00