M14000005553

| (Requestor's Name) |
|-----------------------------------------|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer. |
| J. HORNE |

Office Use Only



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024 NOV -8 PH 3:

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

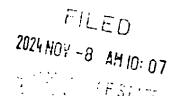
ACCOUNT NO. : 12000000195 REFERENCE: 733021 8331866 AUTHORIZATION : COST LIMIT : \$ 25.00 ORDER DATE: October 30, 2024 ORDER TIME : 11:19 AM ORDER NO. : 733021-435 CUSTOMER NO: 8331866 FOREIGN FILINGS NAME: GPT PINELLAS PARK OWNER LLC __ CORPORATE LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY XXXX WITHDRAWAL/CANCELLATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX PLAIN STAMPED COPY ____ CERTIFICATE OF STATUS

EXAMINER: ____

CONTACT PERSON: Amanda Miller - EXT#

COVER LETTER

| | ation Section n of Corporations | | |
|----------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|
| | PT Pinellas Park Owner LLC | | |
| SUBJECT: | (Name of For | eign Limited Liability | Company) |
| Dear Sir or Mad | am: | | |
| The enclosed wit | thdrawal and fee(s) are submitte | d for filing. | |
| Please return all | correspondence concerning this | matter to the following | ā; |
| | (Name of Person) | | _ |
| | (Firm/Company) | | _ |
| | (Address) | | _ |
| | (City/State and Zip Cod | e) | _ |
| For further infor | mation concerning this matter, p | olease call: | |
| | (Name of Person) | at (at (|) & Daytime Telephone Number) |
| Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | | Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 |
| Enclosed is a ch | eck for the following amount: | | |
| □\$25 Filing Fe | e S30 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

| GPT Pinellas Park Owner LLC |
|----------------------------------------------------------------------------------------------------------------------------------------------|
| (Name of limited liability company) |
| Delaware |
| (Jurisdiction of its organization) |
| 12/01/2014 |
| (Date registered with Florida Department of State) |
| M1400008552 |
| (Florida Document Number) |
| This limited liability company is withdrawing its certificate of authority in this state. Effective Date, if other than the date of filing: |
| /s/ MELANIE MARTIN (Signature of authorized representative) |
| Melanie Martin, Authorized Representative |
| (Typed or printed name of signee) |

Filing Fee: \$25.00

CSC 733021