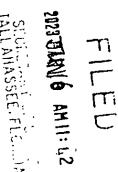
## M17000003556

(R	equestor's Name)	
(Ad	ddress)	
(Á	ddress)	
(Ci	ity/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Be	usiness Entity Nam	e)
(De	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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With



JUN 1 9 2023 D COMMELL



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	06/16/2023	
	KEN	_
	2029864	_
	me: BER REAL ESTAT	E INVESTMENTS I, LLC
☐ Arti	icles of Incorporation/Authorization	to Transact Business
☐ Am	endment	
☐ Cha	ange of Agent	
☐ Rei	instatement	
Co	nversion	
□ Ме	rger	
<b>✓</b> Dis	solution/Withdrawal	
Fic	titious Name	
✓ Oth	ner <del>**</del> CERTIFIE	D COPY UPON FILING **
Authorized	d Amount:\$55.00	
Signature		

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Account#: I20000000088

Date:	06/16/2023	_	
	KEN		
Reference	e #:20298	64	
			INVESTMENTS I, LLC
	ticles of Incorporation//	Authorization t	o Transact Business
	nange of Agent		
☐ Re	einstatement		
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	erger		
<b>√</b> Di	ssolution/Withdrawal		
☐ Fi	ctitious Name		
<b>√</b> 01	ther	** CERTIFIED	COPY UPON FILING **
Authorize	ed Amount:	\$55.00	
Signature	e:		

F: +852.2682.9790

## **COVER LETTER**

	Registratior Division of	i Section Corporations		
cubica		eal Estate Investments 1, LL	C	
SUBJEC	1:	(Name of For	eign Limited Liability	Company)
Dear Sir o	or Madam:			
The enclo	sed withdra	awal and fee(s) are submitte	d for filing.	
Please ret	urn all corr	respondence concerning this	matter to the following	g:
Rachel N	lasory			
		(Name of Person)	,-	_
Golden C	Sate Private	Equity, Inc.		
		(Firm/Company)		_
One Emb	arcadero C	enter, Suite 3900		
		(Address)	<del></del>	_
San Fran	cisco, CA <sup>9</sup>	94111		
		(City/State and Zip Cod	e)	_
For furthe	er informati	ion concerning this matter, p	lease call:	
Rachel N	fasory		415 at (	983-2700
	(N	ame of Person)		& Daytime Telephone Number)
! i	Division of P.O. Box	on Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed	is a check	for the following amount:		
□\$25 Fi	ling Fee	☐ \$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

BER Real Esta	ite Investments I, LLC	
<u> </u>	(Name of limited liability company)	
Delaware		
<del></del>	(Jurisdiction of its organization)	
April 26, 2017		
	(Date registered with Florida Department of State)	
M1700000355	6	
	(Florida Document Number)	
This limited	liability company is withdrawing its certificate of authority in this	state.
more than 90 <b>Note:</b> If the	ve date is listed, the date must be specific and cannot be prior to do days after filing.) date inserted in this block does not meet the applicable statutory fill not be listed as the document's effective date on the Department of the details and the document.	ling requirements.
	/s/ Michele Shahroody	_
	(Signature of authorized representative)  Michele Shahroody, Authorized Signatory	PRESTA VALLE
	(Typed or printed name of signee)	PILLED AHII: 42

Filing Fee: \$25.00