M18000005067

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2023 JUN 23 AN UJ TS

SECRETARY OF STATE
AND AHASSEE, FLORIF

A. RAMSEY

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

		ACCOU	NT NO.	:	12000000	0195	
		REF	ERENCE	:	821683	8079848	
		AUTHORI	ZATION	را مرامن	and to of	Man	
		COST	LIMIT	: (\$ 25.00	non	
ORDER	DATE :	June 19,	2023	- -	• • • • • • • • • • • • • • • • • • •		· • - • • •
ORDER	TIME :	9:01 AM					
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CUSTO	MER NO:	807984	8				
		<u>F0</u>	REIGN F	ILII	<u>vgs</u>		
	NAME:	LRF1 A	BERDEEN	SQ	JARE LLC		
<u>xxx</u>		TE PARTNERSH LIABILITY		Ý			
<u>xxxx</u> v	WITHDRAWA	AL/CANCELL	ATION				
PLEASI	E RETURN	THE FOLLO	WING AS	PRO	OOF OF FI	LING:	
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EXAMINER:

CONTACT PERSON: Eyliena Baker - EXT#

COVER LETTER

TO:

Registration Section

Division of Corporations LRF1 ABERDEEN SQUARE LLC SUBJECT: (Name of Foreign Limited Liability Company) Dear Sir or Madam: The enclosed withdrawal and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Jenna Vargas (Name of Person) Longpoint Realty Partners (Firm/Company) 116 Huntington Ave, Suite 1001 (Address) Boston, MA 02116 (City/State and Zip Code) For further information concerning this matter, please call: 508 558-7310 Jenna Vargas (Name of Person) (Area Code & Daytime Telephone Number) Mailing Address: Street Address: Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Enclosed is a check for the following amount: ☐ \$60 Filing Fee. **■\$25** Filing Fee ☐ \$30 Filing Fee & □\$55 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy

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TALL AHASSEE, FLORIS

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

LRF1 ABERDEEN SQUARE LLC
(Name of limited liability company)
DELAWARE
(Jurisdiction of its organization)
05/25/2018
(Date registered with Florida Department of State)
M18000005067
(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:
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.
which had
(Signature of authorized representative)
Nilesh Bubna
(Typed or printed name of signee)

Filing Fee: \$25.00