

M18000005748

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

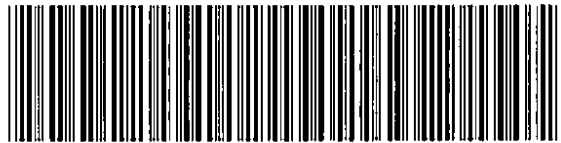
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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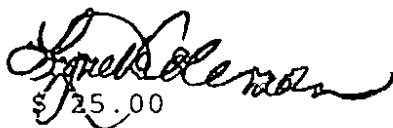
18 JUL 31 AM 11:00

2018 JUL 31 PM 3:42

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AUG 01 2018

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 326279 4804708
AUTHORIZATION : 
COST LIMIT : \$25.00

ORDER DATE : July 30, 2018
ORDER TIME : 10:09 AM
ORDER NO. : 326279-035
CUSTOMER NO: 4804708

FOREIGN FILINGS

NAME: SOUTHOCEAN PRIVATE CREDIT
PARTNERS II GP, LLC

____ 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: Emily Croft - EXT# 62925

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SouthOcean Private Credit Partners II GP, LLC

(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:

Patrick D. Canavan

(Name of Person)

Seward & Kissel LLP

(Firm/Company)

One Battery Park Plaza

(Address)

New York, New York 10004

(City/State and Zip Code)

For further information concerning this matter, please call:

Patrick D. Canavan

(Name of Person)

212

574-1618

at (_____) _____

(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 check for the following amount:

☐ \$25 Filing 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

SouthOcean Private Credit Partners II GP, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

June 19, 2018

(Date registered with Florida Department of State)

M18000005748


(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: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after 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.



(Signature of authorized representative)

David Horvitz

(Typed or printed name of signee)

Filing Fee: \$25.00