## M18000009085

(1	Requestor's Name)
(,	Address)
(1	Address)
! ((	City/State/Zip/Phone #)
PICK-UP	MAIL MAIL
(1	Business Entity Name)
(1	Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:
	J. HORNE
	DEC 19 2022
{	
L	

Office Use Only



900396225779

1) XXX 040.05 01.030.700

2022 DEC 16 AH 10: 05

RECEIVED

2022 DEC 16 AM 10: 28

## Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 12/16/2022	<del></del>		⇔WALK IN⊶
ENTITY NAME GFN	Miramar, LLC		
DOCUMENT NUMBI	R		
J	**PLEASE FILE THE ATTACHE	ED AND RETURN**	
xxxxx	Plain Copy		
I	Certified Copy Certificate of Status		
	**PLEASE OBTAIN THE FOLLOWING I	OR THE ABOVE ENTIT	7/**
	Certified Copy of Arts & Amendmen	te	
	Certificate of Good Standing		
	**APOSTILLE' / NOTARIAL	CERTIFICATION**	
COUNTRY OF DESTI			<del></del>
NUMBER OF CERTIF	ICATES REQUESTED		
TOTAL OWED \$25		ACCOUNT #: 120160	
Please call Tina a	t the above number for any issues	or concerns. Thank	

## **COVER LETTER**

TO: Registration Section Division of Corporations		
GFN Miramar, LLC SUBJECT:		
	reign Limited Liability	Company)
Dear Sir or Madam:		
The enclosed withdrawal and fee(s) are submitte	ed for filing.	
Please return all correspondence concerning this	s matter to the followin	ß:
Bria Krupnick		
(Name of Person)		_
Kayne Anderson Real Estate		
(Firm/Company)		_
Town Center Road, 3rd Floor		
(Address)		_
Boca Raton, FL 33486		_
(City/State and Zip Coo	de)	_
For further information concerning this matter,	please call:	
Erika Yess	561 at (	300-6285
(Name of Person)		& 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 check for the following amount:	:	
\$25 Filing Fee	□\$55 Filing Fee & Certified Copy	[] \$60 Filing Fee, Certificate of Status & Certified Copy



## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

GFN Miramar,	LLC
:	(Name of limited liability company)
Delaware	
1	(Jurisdiction of its organization)
October 4, 201	3
<del>i</del>	(Date registered with Florida Department of State)
M1800000908	5
	(Florida Document Number)
Effective Da (If an effecti more than 90 Note: If the	liability company is withdrawing its certificate of authority in this state.  te, if other than the date of filing:
this date will	not be listed as the document's effective date on the Department of State's records.    Ultra
	(Typed or printed name of signee)

Filing Fee: \$25.00