

M19000007370

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

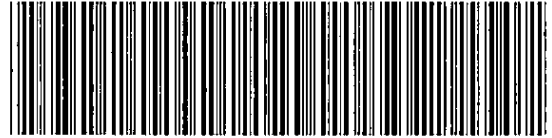
(Business Entity Name)

(Document Number)

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R. HUNT

01/18/24

CT CORP
(850) 656-4724
3458 lakesore Drive
Tallahassee, FL 32312

Date: 01/18/2024
Acc#I20160000072

en: c DW

Name:	Third Avenue at St Petersburg LLC
Document #:	
Order #:	15331129

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
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Amount: \$ **25.00**

Thank you!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Third Avenue at St Petersburg 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:

Jeanette Ireland

(Name of Person)

The Inland Real Estate Group, LLC

(Firm/Company)

2901 Butterfield Road

(Address)

Oak Brook, Illinois 60523

(City/State and Zip Code)

For further information concerning this matter, please call:

Jeanette Ireland

(Name of Person)

at 630 218-8000 ext 6013
(Area Code & 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 ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

2020 JUN 18 PM 4:35
STATE
TALLAHASSEE, FL
FD

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Third Avenue at St Petersburg LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

August 1, 2019

(Date registered with Florida Department of State)

M19000007370

(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)

Robert N. Fontaine, Jr., Treasurer

(Typed or printed name of signee)

2019 JUL 18 PM 4:35
DEPT OF STATE
TALLAHASSEE, FL
ED

Filing Fee: \$25.00