

CORPORATION(S) NAME

| Capital Associates Realty Partner | s Corporation | |
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| () Profit | () Amendment | () Merger |
| () Nonprofit | | |
| () Foreign | Dissolution/Withdrawal | () Merger () Mark () Other () Change of PA |
| | (l) Reinstatement | () Other |
| () Limited Partnership | () Annual Report | () Other () Change of RA |
| ()LLC | () Name Registration | () Change of RA Sign |
| () Contified Const | () Fictitious Name | |
| () Certified Copy | () Photocopies | () CUS |
| () Call When Ready | () Call If Problem | () After 4:30 |
| (x) Walk In | () Will Wait | (x) Pick Up |
| () Mail Out | | |
| 1 | | |
| Name ii 0 01 | 11/8/01 | Order#: 4861985 |
| Availability 1 0 | | 3000046728538: |
| Document A | | -11/08/0101065004 |
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| W.P. Verifier | | Amount: \$ |

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

| Capital Associates Realty Faithers Colpor | |
|--|-----------------------------------|
| (Name of Corporation) | |
| | 올린 중 ㅠ |
| Illinois | ASA . = |
| (Incorporated Under Laws Of) | |
| , , , , , , , , , , , , , , , , , , , | m _⊆ _ <u>M</u> |
| | |
| This corporation is no longer transacting business or conducting af | fairs within the State of Florida |
| This corporation is no longer transacting dusiness or conducting an | ans within the same of florida |
| and hereby voluntarily surrenders its authority to transact business of | or conduct analysin Flora. |
| | |
| This corporation revokes the authority of its registered agent in I | florida to accept service on its |
| behalf and appoints the Department of State as its agent for service | of process based on a cause of |
| action arising during the time it was authorized to transact business | or conduct affairs in Florida. |
| | |
| The following is a current mailing address for the corporation: | |
| - | |
| c/o Capri/Capital Advisors LLC | |
| 1201 North Clark Street, Suite 300 | |
| (Mailing Address) | |
| | |
| The state of the s | |
| Chicago, Illinois 60610 | |
| (City/ State /Zip) | |
| | |
| | |
| The corporation agrees to notify the Department of State in the future | ure of any change in its mailing |
| address. | |
| additess. | |
| | |
| - | President |
| Signature of the chairman or vice chairman of the board, | Title |
| president, or any officer, or if the corporation is in the hards of a | |
| receiver, trustee, or other court-appointed fiduciary, by that fiduciary. | - |
| | 29 |
| | October /, 2001 |
| Typed or printed name | Date |