

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

Certificate of Withdrawal

1142120.06

mmoore

Michael G. Adams **Kentucky Secretary of State** Received and Filed:

4/15/2025 10:18 AM Fee Receipt: \$40.00

WFE

Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	(Foreign Bu	usiness Entity)		
Pursuant to the provisions of KR business entity named below and	d, for that purpose, s	ubmits the following s	tatements:	val on behalf of the
The name of the business en	tity is Willow Run Ga	rdens Managing Co. GP	, LLC	
	(The hame mas	t be identical to the nar	ne on record with the	Secretary of State.)
2. The state or country of forma	tion is Delaware			
The Secretary of State may for on the Secretary of State and	orward to the busine	ss entity at the following ne Secretary of State of	ng street address any of any future changes	process served to this address:
999 WATERSIDE DR STE 2300		NORFOLK	VA	23510-3324
Street Address (No Post Office Bo	ox Numbers)	City	State	Zip Code
 The business entity is not train the Commonwealth or pursua authority from the commissioner The business entity revokes appoints the Secretary of State aduring the time it was authorized of State in the future of any char 	nt to KRS 14A.9-010 of the Department of the authority of its reas its agent for service to transact busines	on (7) the business entity of Insurance. Registered agent to accepte of process in any properties in the Commonwealth.	ept service of process	with a certificate of s on its behalf and a cause of action arising
6. This application will be effect	ive upon filing.			
I declare under penalty of perjur	y under the laws of I	Kentucky that the forgo	oing is true and correc	ot.
\sim		T. Richard Litton,	Jr., Manager	04/09/2025
Signature of Authorized Represe	ntative	Printed Name		Date

Division of Business Filings

P.O. Box 718