

A02000000987

00189-00524-00676-02e71 LP not GP + fee \$52:

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

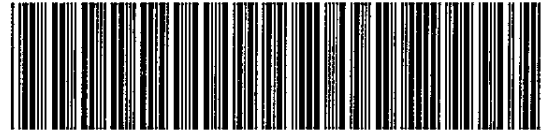
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

8/1 Canal

A02-987

Office Use Only



000056981390

07/08/05--01009--005 **25.00

M. HODGES

08/03/05--01035--010 **27.50

9016 11 10 20



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

July 14, 2005

P.S. FABRICS DESIGN CENTER & UPHOLSTERY, LTD.
1372 BEACH BLVD.
JACKSONVILLE BCH, FL 32250

SUBJECT: P.S. FABRICS DESIGN CENTER & UPHOLSTERY, LTD
Ref. Number: A0200000987

We have received your document for P.S. FABRICS DESIGN CENTER & UPHOLSTERY, LTD and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must complete the attached form to cancel this Limited Partnership, the form submitted is for a General Partnership, also, the fee is \$52.50.

There is a balance due of \$27.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges
Document Specialist

Letter Number: 005A00046573

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: P.S. FABRICS DESIGN CENTER + UPHOLSTREY, LTD.
(Name of Limited Partnership)

DOCUMENT NUMBER: A02000000987

The enclosed Certificate of Cancellation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MRS. SUNNY BARNARD
(Name of Person)

PRIMATE STOCK ENTERPRISES, INC.
(Firm/Company)

1372 BEACH BOULEVARD
(Address)

JACKSONVILLE BEACH, FL 32250
(City/State and Zip Code)

For further information concerning this matter, please call:

SUNNY BARNARD at 904 249 4799
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$52.50 Filing Fee \$61.25 Filing Fee & Certificate of Status \$105.00 Filing Fee & Certified Copy (additional copy is enclosed) \$113.75 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

**CERTIFICATE OF CANCELLATION
FOR**

P.S. FABRICS DESIGN CENTER & UPHOLSTERY, LTD.
(Insert name currently on file with Florida Dept. of State)

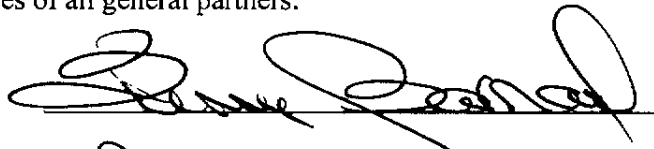
Pursuant to the provisions of section 620.113, Florida Statutes, this Florida limited partnership, whose certificate was filed with the Florida Department of State on 7/22/2002, hereby submits this Certificate of Cancellation.

FIRST: Reason for cancellation: (State why partnership is submitting cancellation)

ONE PARTNER PURCHASED THE INTEREST OF
THE OTHER AND THE PARTNERSHIP IS
BEING DISSOLVED.

SECOND: This Certificate of Cancellation shall be effective at the time of its filing with the Florida Department of State.

THIRD: Signatures of all general partners:



Pamela Davidson

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