A12468

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(Ac	idress)	
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SECKETARY OF STATE

RESIGNATION OF REGISTERED AGENT FOR A LIMITED PARTNERSHIP

Pursuant to the provisions of section 620.1051(2), Florida Sta	tutes, the undersigned,
C T CORPORATION SYSTEM (Name of Registered Agent)	, hereby resigns as Registered
Agent for SHADETREE APARTMENTS, LTD. (FL. DOM	M.) (A12468)
(Name of Limited Partn	ership)

A copy of this resignation was mailed to the above listed partnership at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

(Signature)
THERESA ALFIERI
ASSISTANT SECRETARY

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

FILING FEE: \$87.50

INHS16(9/98)