## B0500000023

•				
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Dusiness Entry Name)				
(Document Number)				
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Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Special instructions to Filling Officer.				
L. SELLERS				
APR 17 2008				
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04/15/08--01021--021 \*\*105.00

SECRETARY OF STATE

## **COVER LETTER**

TO: Registration Division of	Section Corporations			
SUBJECT: GLL BI			Described	
(Name of	Foreign Limited Partnersl	nip or Limited Liability Li	mited Partnersnip)	
The enclosed Notic	e of Cancellation and	fee(s) are submitted for	or filing.	
Please return all con	rrespondence concerni	ng this matter to:		
Mary Ward				
	(Contact Person)			
Boult Cummings Conn	ers & Berry			
	(Firm/Company)			
1600 Division Street, S	uite 700			
	(Address)			
Nashville, TN 37203				
	(City, State and Zip Code)	· · · · · · · · · · · · · · · · · · ·		
For further informa	tion concerning this m	atter, please call:		
Mary Ward		at (615 ) 25	2-3552	
(Name of Con	tact Person)		Daytime Telephone Number)	
Enclosed is a check	for the following amo	ount:		
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy	\$113.75 Filing Fee, Certified Copy, and Certificate of Status	
STREET ADDRES	SS:	MAILING	ADDRESS:	
Registration Section	Registration Section		Registration Section	
Division of Corporations		Division of Corporations		
Clifton Building		P. O. Box 6327		
2661 Executive Center Circle		Tallahassee	e, FL 32314	
Tallahassee, FL, 32301				

## NOTICE OF CANCELLATION **FOR** FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

	GLL BL Properties, L.P.	
(Name of	imited partnership or limited liability limited partnership)	
	Delaware	
	(Jurisdiction of formation)	
	5/25/2005	
	Date authorized to transact business in Florida)	
	ership or limited liability limited partnership is no longer orida and wishes to cancel its certificate of authority pursuant	to
	lorida Department of State as its agent for service of process f t of the transaction of business in this state.	or
Effective date, if other th (Effective date cannot be prio Department of State.)	an the date of filing: to nor more than 90 days after the date this document is filed by the Flori	da
Signature of a general pa	tner:  Solution of the state of	
Typed or printed name: J. Greer Cummings, Jr., Assistant Secretary of GLL, BL, Gen	al Partner, Inc.	
Filing Fee:	\$52.50	

\$52.50

\$8.75

**Certified Copy (optional):** 

**Certificate of Status (optional):**