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SECRETARY OF STATE
FALLAHASSEF, FLORIDA

## **COVER LETTER**

TO: Registration Division of	Section Corporations		
SUBJECT: New	Century Ente	rprises, Ltd.	ited Partnershin)
(Name	of Florida Limited Partners	snip or Limited Liability Lin	med Farmership)
The enclosed Stater	nent of Termination ar	nd fee(s) are submitted f	or filing.
Please return all cor	respondence concernia	ng this matter to:	
Edgar S. Wo	oolard Jr.		
	(Contact Person)		
New Centur	y Managemen	t Corp	
	(Firm/Company)		
107 Via Cap			
	(Address)		
	Gardens, FL (City, State and Zip Code)		
For further informa	tion concerning this m	atter, please call:	
Steven Thib	odeau. CPA	of (518 ) 45	2-2856
(Name of	Contact Person)	(Area Code and D	2-2856 Paytime Telephone Number)
Enclosed is a check	for the following amo	ount:	
\$52.50 Filing Fee	X \$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 ADDRESS:		MAILING A	ADDRESS:
Registration Section		Registration Section	
Division of Corporations		Division of Corporations	
Clifton Building		P. O. Box 6327	
2661 Executive Center Circle Tallahassee, FL 32301		Tallahassee,	FL 32314

## STATEMENT OF TERMINATION FOR

<b>New Century Enterpris</b>	es, Ltd.		
(Name of Florida Limited Pa	artnership or Limited Liability Limited Partnership)		
	n 620.1203, Florida Statutes, this Florida lim		
Florida Department of State on Statement of Termination.	ed partnership, whose certificate was filed wind arch 10, 2000 hereby subr	ith the mits this	
The limited partnership or limited li its affairs and wishes to file a staten	ability limited partnership has completed win nent of termination.	nding up	
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	r the person appointed pursuant to		
coque - cos sug	7. 7.0	_	
	-	06 NO	
		W 27	
Filing Fee:	\$52.50	E C	
Certified Copy (optional):	\$52.50	105 115 115 115 115	
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