Requester's Name	0001246
3042 Dominion	4.
Address  SAFA Harlow Fr  City/State/Zip Phone #  340	4000056217744 -05/28/0201074002 *****25.00 ******25.00
	Office Use Only
CORPORATION NAME(S) & DOCUM	
1. H - 1240 (Corporation Name)	400056217744 -06/17/0201074016 (Document#) ******27.50 ******27.50
2 00789-00524-DD	10710-00Pn71
(Corporation Name)	(Document #)
3. OYMS FLES (Corporation Name)	(Document#)
4. (Corporation Name)	Cancellation (Document#)
☐ Walk in ☐ Pick up time	Certified Copy
☐ Mail out ☐ Will wait	Photocopy
NEW FILINGS	AMENDMENTS SS: 3
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other
CR2E031(7/97)	Examiner's Initials



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 4, 2002

BROWN 3042 DOMINION CT. SAFETY HARBOR, FL 34695

SUBJECT: BCLAN INVESTMENTS, LTD.

Ref. Number: A0000001246

We have received your document for BCLAN INVESTMENTS, 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 forms submitted are to dissolve a General Partnership. The fee to file a cancellation 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.

Letter Number: 302A00036138

Michelle Hodges Document Specialist

## CERTIFICATE OF CANCELLATION FOR

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, Zoo2, hereby submits this certificate of cancellation.
FIRST: Reason for cancellation: (State why partnership is submitting cancellation)  ADMINISTRATIVE COSTS EXCRECT He benefit to  CONTINUE HE PARTNERSHIP IN 1th CUMENT FRANCE.
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:    SECURITY   SECURITY