A01.000.000393

HERITAGE WEST OF ALACHUA CO. LTD. 20725 S.W. 46TH AVENUE NEWBERY, FL 32669

City/State/Zip

Phone #



Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

(Corporation Name)	(Document #)
Corporation Name)	(Document #)
(Corporation Name)	(Document#) 90005505859 —-9 -05/13/0201028017 ******52.50 *******52.50
(Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait	Certified Copy Photocopy Certificate of Status
NEW FILINGS	AMENDMENTS
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

J. BRYAN JUN 2 0 2002

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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 15, 2002

HERITAGE WEST OF ALACHUA CO. LTD. 20725 SW 46TH AVE. NEWBERY, FL 32669

SUBJECT: OXFORD MANOR OF MADISON LTD.

Ref. Number: A01000000393

We have received your document for OXFORD MANOR OF MADISON LTD. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 620.114, Florida Statutes, requires the original certificate of limited partnership, an affidavit, a certificate of cancellation, or supplemental affidavit to be signed by all of the general partners.

Please return the original and one copy of 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) 245-6043.

Joey Bryan Document Specialist Tax Liens

Letter Number: 402A00030853

CERTIFICATE OF CANCELLATION FOR

	(A) (A) (C)
Oxford Manor of Madison, Ltd	1950 24
(Insert name currently on file with Florida Dept. of State)	· Plating
Pursuant to the provisions of section 620.113, Florida Statutes, this Fl	orida limited partnership,
whose certificate was filed with the Florida Department of State on _	3.19.01
hereby submits this certificate of cancellation.	

FIRST: Reason for cancellation: (State why partnership is submitting cancellation)
No longer conducting, business

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: