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(Re	equestor's Name)	
(Ac	ldress)	
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TRANSMITTAL LETTER

STREET ADDRESS:

Registration Section
Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CERTIFICATE OF CANCELLATION FOR

CAT Partners LTD
(Insert name currently on file with Florida Dept. of State)
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 $\frac{03/03/2003}{6003}$ hereby submits this Certificate of Cancellation.
FIRST: Reason for cancellation: (State why partnership is submitting cancellation)
Partnership and Business is dissolving as of December 16, 2004.
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:
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