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TALLAHASSEE FLORIDA

COVER LETTER

	of Corporations	· · · · · ·	
SUBJECT:	The Rogell Family Limite	ed Partnership	
	(Name o	of Limited Partnership)	
DOCUMENT NU	JMBER: A0300001734		
The enclosed Cert	ificate of Cancellation and fee(s) are	submitted for filing.	·
Please return all co	orrespondence concerning this matter	to the following:	
	Jeffrey S. Wachs	s, Esq. Name of Person)	
	Doumar, Allsworth	<u>et al</u> (Firm/Company)	·
	1177 S.E. 3rd Aver	iue (Address)	
	<u>Fort Lauderdale, F</u> (City	FL 33316 /State and Zip Code)	
For further inform	ation concerning this matter, please c	all:	
Jeff	rey S. Wachs (Name of Person)	at (954) 762- (Area Code & Daytime	3400 Telephone Number)
Enclosed is a chec	k for the following amount:		
\$52.50 Filing F	ee XK\$61.25 Filing Fee & Certificate of Status	S105.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$113.75 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Registrati Division o Clifton Bo 2661 Exe	C/COURIER ADDRESS: on Section of Corporations uilding cutive Center Circle ee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	

CERTIFICATE OF CANCELLATION FOR

THE ROGELL	FAMILY LIMITED	PARTNERSH:	IP	
	(Insert name currently of	on file with Florida D	ept. of State)	
E Pursuant to the provisions of	section 620.113, F	lorida Statutes	, this Florida li	mited partnership, whose
certificate was filed with the	Florida Departmen	t of State on _	12/13/03	, hereby submits this
Certificate of Cancellation.				
FIRST: Reason for cancella	tion: (State why pa	artnership is su	ıbmitting cance	ellation)
The Partnership	has ceased ope	erating and	doing busin	ess.
SECOND: This Certificate of Department of State.	of Cancellation sha	ll be effective	at the time of it	ts filing with the Florida
THIRD: Signatures of all go	eneral partners:			
./	20 .			•
	Morris Rogg	7.00 11		-
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