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OL AUG 25 PM 1:09 SECRETARY CF STATE



TRANSMITTAL LETTER

· TO: **Registration Section** Division of Corporations

- SUBJECT: _________ SBD COPYRIGHT LIMITED PARTNERSHIP

(Name of Limited Partnership)

DOCUMENT NUMBER: A0400000480

The enclosed Certificate of Cancellation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROBERT J. ROBES

(Name of Person)

GREENBERG TRAURIG, P.A.

(Firm/Company)

5100 TOWN CENTER CIRCLE, SUITE 400 (Address)

BOCA RATON, FLORIDA 33486

(City/State and Zip Code)

For further information concerning this matter, please call:

ROBERT J. I	ROBES	- _{at (} 561) 955-7602		
Enclosed is a check for	(Name of Person)	(Area Code & Daytime Telephone Number)	Or AUG	
□ \$52.50 Filing Fee	\$61.25 Filing Fee & Certificate of Status	□ \$105.00 Filing Fee & □ \$113.75 Filing Fee Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	25 PH 1:09	FLED
Regis Divîs 409 E	EET ADDRESS: stration Section ion of Corporations 5. Gaines Street hassee, Florida 32399	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		

CERTIFICATE OF CANCELLATION FOR

SBD COPYRIGHT LIMITED PARTNERSHIP

(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 March 25, 2004 _____, hereby submits this Certificate of Cancellation.

FIRST: Reason for cancellation: (State why partnership is submitting cancellation) The General Partner, SBD Copyright, Inc., has been dissolved.

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:

SBD Copyright, Inc

By: Robert J. Robes, Assistant Secretary

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