

A04 00000 1204

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

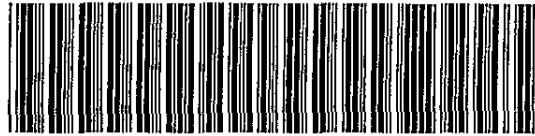
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

A04-1204
OK

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tru-Law, Ltd
(Name of Limited Partnership)

DOCUMENT NUMBER: A 0400000 1204

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

Please return all correspondence concerning this matter to the following:

Diane Lawson
(Name of Person)

(Firm/Company)

1937 14811 7th Avenue East
(Address)

Bradenton FL 34212
(City/State and Zip Code)

For further information concerning this matter, please call:

Diane Lawson
(Name of Person)

at (941) 954-4044
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$52.50 Filing Fee

☐ \$61.25 Filing Fee &
Certificate of Status

☐ \$105.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$113.75 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

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STATE
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**CERTIFICATE OF CANCELLATION
FOR**

Tru-Law, 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 7/22/4, hereby submits this Certificate of Cancellation.

FIRST: Reason for cancellation: (State why partnership is submitting cancellation)

*Not needed. - No Business
transacted.*

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:

Deane Lawson

Sharon Tushovske

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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