

A 04 000001715

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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☐

MAIL

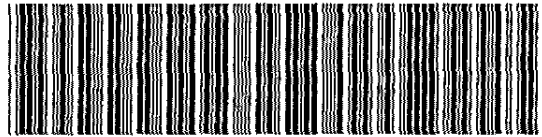
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Zinis Ltd
(Name of Limited Partnership)

DOCUMENT NUMBER: A04000001715

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

Please return all correspondence concerning this matter to the following:

Jurabek Azimov
(Name of Person)

(Firm/Company)

7515 Sentry Cir, # 208
(Address)

Orlando, FL 32807
(City/State and Zip Code)

For further information concerning this matter, please call:

Jurabek at (407) 619-5460
(Name of Person) (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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**CERTIFICATE OF CANCELLATION
FOR**

Zinis 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 11/02/2004, hereby submits this Certificate of Cancellation.

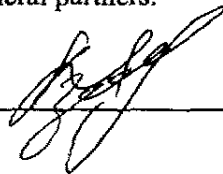
FIRST: Reason for cancellation: (State why partnership is submitting cancellation)

We are changing the status. It is being
changed to Sole Proprietorship.

SECOND: This Certificate of Cancellation shall be effective at the time of its filing with the Department of State.

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TALLAHASSEE FLORIDA

THIRD: Signatures of all general partners:

 Surabek Azimov