| % PO Bo   | questor's Name   | ·  |
|---|--|--|
| City/State/   | 31003<br>Zip Phone #                                     | Office Use Only  |
| CORPORATION 1   | NAME(S) & DOCUMENT NUMB                                  | BER(S), (if known):  |
| 1(Corpo   | oration Name) (Docu                                      | ıment #}   |
| 2   |  | ,  |
|   | oration Name) (Docu                                      | ument #)   |
| 3(Corpo   | ration Name) (Docu                                       | ıment #)   |
| 4.  | (  |  |
| (Corpo  | ration Name) (Docu                                       | ment #)  |
| Mail out  | Pick up time Will wait Photocopy                         | FILED  SECRETARY OF STATE VLL All ASSEE, FLORID,  Certificate of Status  Certificate of Status |
| NEW FILINGS   | AMENDMENTS:  | O: 4:  |
| Profit  | Amendment  |  |
| NonProfit   | Resignation of R.A., Officer/ Director                   |  |
| Limited Liability   | Change of Registered Agent                               |  |
|   | Dissolution/Withdrawal                                   |  |
| Name Domestication Availability   | Merger   |  |
| Availability<br>Other<br>Document   | 1-1-1-8-1  | <b></b>  |
| Availability Other  Document  Examiner OTHER FILINGS  | REGISTRATION = QUALIFICATION                             |  |
| Other  Document  Exa OTHER FILINGS  Updater  Annual Report  Updater  Updater  Efficitions Name                  | REGISTRATION/  | 3000060533434<br>-06/27/0201003015<br>******52.50 ******25.00                                  |
| Availability Other  Document  Examiner OTHER ELLINGS  | REGISTRATION/ = QUALIFICATION                            |  |
| Other  Document  Examiner OTHER FILINGS  Update Annual Report  Update Fictitious Name Verifyer Name-Reservation | REGISTRATION/ QUALIFICATION  Foreign                     | *****52.50 ******25.00   |
| Other  Document  Exa hiner OTHER FILINGS  Updater  Updater  Updater  Updater  Wernyer  Name-Reservation         | REGISTRATION/ QUALIFICATION  Foreign Limited Partnership | 300006053343—-4<br>-06/27/0201003015<br>******52.50 ******25.00                                |



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 12, 2002

JESUP LTD. C/O P.O. BOX 9 VALDOSTA, GA 31603

SUBJECT: JESUP LTD. Ref. Number: A09162

We have received your document for JESUP LTD.. However, the document has not been filed and is being returned for the following:

The above referenced entity must file a 2002 Uniform Business Report if it wishes to maintain its authority to transact business in Florida. If it does not, please complete the enclosed certificate of cancellation form and return it to this office with a check made payable to the Florida Department of State for \$52.50.

If the entity intends to maintain its status in Florida, it must submit an amendment to change the general partner on our records. An amendment form is enclosed for your convenience. The fee to file the amendment is \$52.50.

Furthermore, the new general partner "JVD INVESTMENTS, INC" will have to register to transact business in Florida. We are enclosing the application to register an out-of-state corporation to transact business in Florida, as well. The fee to register the corporation will be \$70 provided it has not transacted business prior to January 1, 2002.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6911.

Brenda Tadlock Sr. Corporate Section Administrator

Letter Number: 802A00038671

## CERTIFICATE OF CANCELLATION FOR

| Jesup Ltd.  |  |
|---|--|
| (insert name current  | tly on file with Florida Dept. of State)   |
| Pursuant to the provisions of section 620.17 submits this certificate of cancellation in or of State. | 74, Florida Statutes, this foreign limited partnership hereby rder to cancel its registration with the Florida Department  Signature of a General Partner)   |
| STATE OF <u>Georgia</u>   | President - JVD Investments Inc<br>(Fyped or Printed name of General Partner Signing Above)  |
| COUNTY OF LOWINDES  | FILED  RRY OF STATE  SSEE. FLORING  L2  TOTAL  TOTA |
| On this day of  |  |
| who is personally know  | n to me  |
| whose identity I proved   | on the basis of  |
| ·   |  |
|   | Criptal Wilson   |
|   | Notary Public Signature  Crystal Wilson  Notary's Printed Name   |
| Seal  | Notary Public, Lowndes County, Georgia My Commission Expires Sept. 27, 2004  My Commission Expires:  |