A 11373

·					
(Requestor's Name)					
(Address)					
(Address)					
(loaless)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



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2007 HAR -6 AM H: 24
SECRETARY OF STATE
TAIL AHASSEF FLOSIO

H 11323

Brandywine Financial Services Corporation

P.O. Box 999 Chadds Ford, PA 19317 Ph: (610) 388-9600 Fax: (610) 388-9616

February 28, 2007

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re:

Dade City Partners, Ltd.

Notice of Cancellation for Foreign LP

Via Certified Mail
Return Receipt Requested
7005 2570 0001 3687 6946

Dear Sir/Madam:

Enclosed in duplicate, please find the State of Florida Notice of Cancellation for Foreign Limited Partnership for the above-referenced limited partnership along with a check in the amount of \$113.75 for the filing fee, certified copy and certificate of status.

Please send evidence of the filing to my attention at the address shown above. A self-addressed stamped envelope is enclosed.

Should you have any questions, please call me at (610) 388-9600.

Sincerely,

Dot Dallas

A. A. to Chief Financial Officer

Enclosures

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and out of the state

COVER LETTER

TO: Registration Division of	1 Section Corporations					
SUBJECT: Dade C	ity Partners, Ltd. f Foreign Limited Partners	hip or Limited Lia	bility Lin	nited Partnership)		
The enclosed Notic	e of Cancellation and	fee(s) are subm	itted for	r filing.		
Please return all co	rrespondence concerni	ing this matter t	o:			
Dot Dallas						
	(Contact Person)					
Brandywine Financial	Services Corporation					
	(Firm/Company)					
2 Ponds Edge Drive						
	(Address)					
Chadds Ford, PA 1931	7					
	(City, State and Zip Code))				
For further informa	tion concerning this m	atter, please ca		3-9600, ext. 225		
(Name of Cor	(Name of Contact Person)		/	Daytime Telephone	e Number)	
Enclosed is a check	for the following amo	ount:			·	
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Fill and Certified		\$113.75 Fili Certified Copy Certificate of S	, and	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314		est of the state o		
·					HII: 2 STATE ORID	; — <u></u>

NOTICE OF CANCELLATION FOR FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

	Dade City Partners, Ltd.	
(Name of limited par	tnership or limited liability limited par	rtnership)
	Pennsylvania	
((Jurisdiction of formation)	
	10/08/1981	
(Date autho	orized to transact business in Florida)	
This foreign limited partnership or transacting business in Florida and s. 620.1907, F.S.		
This entity appoints the Florida Derights of action arising out of the tr		
Effective date, if other than the dat (Effective date cannot be prior to nor mor Department of State.)		ument is filed by the Florida
Signature of a general partner:	VICE PRESIDENT OF SPIANDYMME CORP GENERAL PARTNER	CRATION,
Typed or printed name:		200 SE TAL
Denise M. Doyle		TAHA CRE
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75	R-6 AHII TARY OF STA
		RATE 2