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| | hambra Pla Address | | nn22838427 | |
| City/State | Sobles FL 3 Zip Phone # | 0ffic | -09/03/9701035013 *****52.50 *****52.50 ce Use Only | |
| CORPORATION | NAME(S) & DOCUM | MENT NUMBER(S), (if know | /n): | |
| 1(Cor | poration Name) | (Document #) | | |
| 2. <u>(Cor</u> | poration Name) | (Document #) | | |
| 3(Cor | poration Name) | (Document #) | | |
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| □ Walk in | Pick up time | Certified (| Сору | |
| Mail out | Will wait | Photocopy Certificate | 9 = | |
| NEW FILINGS | AMENDMEN | TS | ETARY LG 29 | |
| Profit | Amendment \ | talle no 2 9- | A REPORT | |
| NonProfit | Resignation of R.A | , Officer/ Director | AH IO: | |
| Limited Liability | Change of Register | red Agent | TE Flows 24 | |
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| OTHER FILINGS | REGISTRA QUALIFICA | TION/ | 52.50 | |
| Annual Report | | ATTON (M) | CTEC | |
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Examiner's Initials des

CERTIFICATE OF CANCELLATION FOR

| (insert name currently on file with Florida Dept. of State) | | |
|---|-----------------------|--|
| Pursuant to the provisions of section 620.113, Florida Statutes, this Florida limited partnership, certificate was filed with the Florida Department of State on $\frac{3/18/82}{}$, submits this certificate of cancellation. | whose hereby | |
| FIRST: Reason for cancellation: (State why partnership is submitting cancellation) | | |
| SECOND: This certificate of cancellation shall be effective at the time of its filing with the Department of State. | 97 AUG \$ 9 AH 10: 24 | SECRETARY OF STATE OIVISION OF CORPORATION |
| THIRD: Signatures of all general partners: | _ | 35 |
| A C J - INTERPRESION THRESTORESTS, iac | • | |
| ARMANDO COLINA Hunters Creek No. | | |
| HENRY BEFEIER | | |
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