A15637

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September 10, 1998

Florida Dept. of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 000002644450--5 -09/21/98--01062--004 \*\*\*\*\*52.50 \*\*\*\*\*52.50

Dear Sir or Madam:

Enclosed find a check for \$52.50 and a completed cancellation of Limited partnership form. Please send acknowledgement to above address if one is available at no additional charge than that remitted.

Thomas M. Jobes

Name Availability

Document Examiner

Updater

Updater Verifyer

Acknowledgemer

W. P. Verifyer

A15037

SECRETARY OF STATE DIVISION OF CORPORATIONS

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## CERTIFICATE OF CANCELLATION FOR

FOWLER STREET PLAZA, 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 $11/03/1983$ ,
hereby submits this certificate of cancellation.
FIRST: Reason for cancellation: (State why partnership is submitting cancellation)
PARTHERSHIP WAS DISSOLVED

**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:

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