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(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

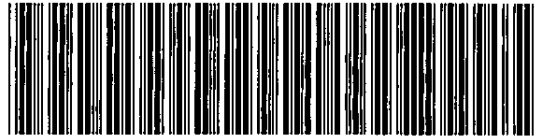
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FINANCIAL DEVELOPMENT COMPANY, LTD.
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARTIN LASHER

(Name of Person)

FINANCIAL DEVELOPMENT COMPANY, LTD.

(Firm/Company)

1309 Timber Lane

(Address)

Boulder, CO 80304

(City/State and Zip Code)

For further information concerning this matter, please call:

MARTIN LASHER

(Name of Person)

at (303) 938-1360

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☒ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

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TALLAHASSEE, FLORIDA

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

FINANCIAL DEVELOPMENT COMPANY, LTD.

(Name of limited partnership or limited liability limited partnership)

CALIFORNIA

(Jurisdiction of formation)

January 31, 1985

(Date authorized to transact business in Florida)

This foreign limited partnership or limited liability limited partnership is no longer transacting business in Florida and wishes to cancel its certificate of authority pursuant to s. 620.1907, F.S.

This entity appoints the Florida Department of State as its agent for service of process for rights of action arising out of the transaction of business in this state.

Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Signature of a general partner: _____

[Handwritten signature: Martin Lasher]

Typed or printed name: _____

MARTIN LASHER

Filing Fee:	\$52.50
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

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TALLAHASSEE, FLORIDA