

1720689

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

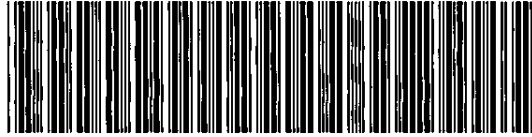
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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03/15/07--01001--012 \*\*113.75

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07 MAR 15 AM 8:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LP 52.50  
cert 61.25

**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: Clearwater Partners Limited  
Notice of Cancellation for Foreign LP

Via Certified Mail  
Return Receipt Requested  
7005 2570 0001 3687 6960

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

07 MAR 15 AM 8:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Clearwater Partners Limited  
(Name of Foreign Limited Partnership or Limited Liability Limited Partnership)

The enclosed Notice of Cancellation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Dot Dallas  
(Contact Person)

Brandywine Financial Services Corporation  
(Firm/Company)

2 Ponds Edge Drive  
(Address)

Chadds Ford, PA 19317  
(City, State and Zip Code)

For further information concerning this matter, please call:

Dot Dallas at (610) 388-9600, ext. 225  
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> \$52.50 Filing Fee | <input type="checkbox"/> \$61.25 Filing Fee<br>and Certificate of<br>Status | <input type="checkbox"/> \$105.00 Filing Fee<br>and Certified Copy | <input checked="" type="checkbox"/> \$113.75 Filing Fee,<br>Certified Copy, and<br>Certificate of Status |
|---|---|--|--|

**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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

07 MAR 15 AM 8:37

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

Clearwater Partners Limited

(Name of limited partnership or limited liability limited partnership)

Pennsylvania

(Jurisdiction of formation)

09/04/1985

(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 in all 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:

VICE PRESIDENT OF BRANDYWINE CORPORATION,  
GENERAL PARTNER

*Denise M. Doyle*

Typed or printed name:

*Denise M. Doyle*

<b>Filing Fee:</b>	<b>\$52.50</b>
<b>Certified Copy (optional):</b>	<b>\$52.50</b>
<b>Certificate of Status (optional):</b>	<b>\$8.75</b>

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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