

A 22333

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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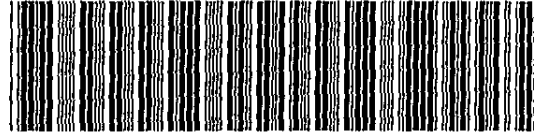
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/17/04 --01029--013 **23.75

02/28/05--01073--004 **27.50

2005 FEB 25 AM 10:50
TALLAHASSEE, FLORIDA

J. BRYAN *W* DEC 28 2004

J. BRYAN FEB 28 2005

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SPACE AGE INVESTMENT CLUB
(Name of Limited Partnership)

DOCUMENT NUMBER: A22333

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

Please return all correspondence concerning this matter to the following:

JOSEPH L. MCKNIGHT

(Name of Person)

SPACE AGE INVESTMENT CLUB

(Firm/Company)

6512 RIDGE CT

(Address)

TITUSVILLE, FL 32780

(City/State and Zip Code)

2005 FEB 25 PM 10:58
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

JOSEPH L. MCKNIGHT

(Name of Person)

at (321) 269-4808

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> \$52.50 Filing Fee | <input checked="" type="checkbox"/> \$61.25 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$105.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$113.75 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|---|---|---|

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

December 28, 2004

SPACE AGE INVESTMENT CLUB, A LIMITED PARTNERSHIP
6512 RIDGE CT.
TITUSVILLE, FL 32780

SUBJECT: SPACE AGE INVESTMENT CLUB, A LIMITED PARTNERSHIP
Ref. Number: A22333

We have received your document for SPACE AGE INVESTMENT CLUB, A LIMITED PARTNERSHIP and your check(s) totaling \$33.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$27.50.

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 604A00071679

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 02-25-2008 BY 60322
000000000000000000000000

**CERTIFICATE OF CANCELLATION
FOR**

SPACE AGE INVESTMENT CLUB, A LIMITED LIABILITY PARTNERSHIP

(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 04/09/1986, hereby submits this Certificate of Cancellation.

FIRST: Reason for cancellation: (State why partnership is submitting cancellation)

PARTNERSHIP DISSOLVED - ALL ASSETS IN PARTNERSHIP SOLD.

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:

Joseph L. Mc Knight

FILED
2005 FEB 25 AM 10:58
CLERK OF THE COURT
TALLAHASSEE, FLORIDA