Requester's Name 800004376718--06/07/01--01135--003 \*\*\*\*\*25.00 \*\*\*\*\*25.00 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 800004376718-(Document #) (Corporation Name) -06/07/01--01135--004 \*\*\*\*\*61.25 \*\*\*\*\*61.25 (Document #) (Corporation Name) <del>200004376</del>718--7 (Document #) (Corporation Name) -08/06/01--01013--014 \*\*\*\*\*18.75 (Document #) (Corporation Name) ☐ Certified Copy ≥ Walk in Pick up time Certificate of Status ☐ Photocopy ■ Will wait ☐ Mail out **AMENDMENTS NEW FILINGS** Amendment ■ Profit Resignation of R.A., Officer/Director

REGISTRATION/QUALIFICATION

☐ Change of Registered Agent

Dissolution/Withdrawal

Foreign Limited Partnership

Merger

Reinstatement

Trademark

Other

Examiner's Initials

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Not for Profit

Other

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OTHER FILINGS

Annual Report

Fictitious Name

DCC



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 15, 2001

CJF GROUP 6915 RED ROAD, STE 211 CORAL GABLES, FL 33143

SUBJECT: C.J.F. KENRICK, OF FLORIDA L.P., LTD.

Ref. Number: A22402

We have received your document for C.J.F. KENRICK, OF FLORIDA L.P., LTD. and your check(s) totaling \$86.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have completed the wrong application. The form you used is for a general partnership not a limited partnership. Please complete the attached application. Please note that the filing fees are different.

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) 487-6051.

Diane Cushing Corporate Specialist

Letter Number: 201A00036730

## CERTIFICATE OF CANCELLATION FOR

## C.J.F KENRICK, LTD.

Pursuant to the provision of section 620.113, Florida Status, this Florida limited partnership, whose certificate was filed with the Florida Department of State on 4-22-86, hereby submits this certificate of cancellation.

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

- All general partners agreed and authorized cancellation of limited partnership.

**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

SECRETARY OF STATE

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