

Requester Name

Address

C Sheldon P. Davis, Esq.
P.O. Box 66569
St. Pete Beach, FL 33736

e #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #) 300004720833--2
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3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

FILED
2001 DEC 12 AM 8:24
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Examiner's Initials

**CERTIFICATE FOR CANCELLATION
FOR**

Okaloosa Community Radiation Therapy Oncology Center, L.T.D.

(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 May 14th, 1986, hereby submits this certificate for cancellation.

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

No longer in business.

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:

**RADIATION THERAPY INVESTMENTS, INC.
GENERAL PARTNER**

BY:



GERALD H. SOKOL, PRESIDENT

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