

A27028

Requestor's Name

LOUIS HIRSH INVESTMENTS

P.O. Box T
Coryngham, PA 18219

600002066286--6

-01/23/97--01070--001

****105.00 ****105.00

Office Use Only

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

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
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- Walk in Pick up time _____ Certified Copy
 Mail out Will wait Photocopy Certificate of Status

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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Examiner's Initials

**CERTIFICATE OF CANCELLATION
FOR**

EAST FOOD PROPERTIES
(insert name currently on file with Florida Dept. of State) LOUIS HIRSH, GENERAL PARTNER

Pursuant to the provisions of section 620.174, Florida Statutes, this foreign limited partnership hereby submits this certificate of cancellation in order to cancel its registration with the Florida Department of State.

STATE OF PENNSYLVANIA

COUNTY OF LUZERNE

On this 16~~th~~ day of JANUARY, 19 97, LOUIS HIRSH,
personally appeared before me,

- who is personally known to me
- whose identity I proved on the basis of

Robert J. [Signature]

Mary J. Wilcox
Notary Public Signature

Notarial Seal
Mary J. Wilcox, Notary Public
Notary Public for Luzerne County
My Commission Expires Nov. 8, 1997
Member, Pennsylvania Association of Notaries

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TALLMANSBURG
SEAL

Seal My Commission Expires: _____