## A 27113 Mariner Health Requestor's Name 125 Eugene O'Nill Drive Address Mus London, Ct 06320 City/State/Zip Phone #

Office Use Only

Examiner's Initials

1(Cor	poration Name)	(Document #)	
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CR2E031(1/95)

## CERTIFICATE OF CANCELLATION FOR

REGENCY MEDICAL TUVESTORS IV, LTO.

(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 <u>SEPTEMBER 27, 1988</u>, hereby submits this certificate of cancellation.

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

NO LONGER OF GRATING AND AFFAIRS WRAPPED UP.

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:

REGENCY HEALTH CARE CENTERS, INC.

HOLMES HEALTH CARE INC.