

A28196

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

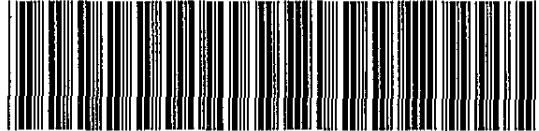
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*[Handwritten Signature]*

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04 DEC 22 AM 9:44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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ORLANDO  
TALLAHASSEE  
TAMPA

December 22, 2004

E-MAIL ADDRESS  
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VIA HAND DELIVERY

Division of Corporations  
Department of State  
409 East Gaines Street  
Tallahassee, Florida 32399

Re: Certificate of Cancellation of Certificate of Limited Partnership  
of Blue Heron Groves, Ltd., a Florida limited partnership  
Our File No. 4020288-2

FILED  
04 DEC 22 AM 9:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dear Madam or Sir:

Enclosed is an original and one copy of **Certificate of Cancellation of Certificate of Limited Partnership of Blue Heron Groves, Ltd.** Please file this Certificate and issue one **Certified Copy**. This firm's check in the amount of \$105.00 is enclosed. Upon receipt of this request, please date-stamp the copy of this letter attached, and call me when the certified copy is ready for pick up.

Thank you for your assistance in this matter.

Sincerely,

*Mari-Jo Lewis-Wilkinson*

Mari-Jo Lewis-Wilkinson  
Paralegal

Enclosures

**CERTIFICATE OF CANCELLATION  
OF  
CERTIFICATE OF LIMITED PARTNERSHIP  
OF BLUE HERON GROVES, LTD., a Florida limited partnership**

04 DEC 22 AM 9:45  
FILED  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

Blue Heron Groves, Ltd. hereby files this Certificate of Cancellation of the Certificate of Limited Partnership as follows:

1. The name of the limited partnership is BLUE HERON GROVES, LTD., a Florida limited partnership, Document No. A28196.
2. The Certificate of Limited Partnership was filed with the Florida Department of State on April 12, 1989.
3. This Certificate of Cancellation is filed pursuant to the consent and agreement of the Partners with respect to the liquidation of the partnership, the winding up of the affairs of the partnership and orderly liquidation and dissolution of the partnership pursuant to the Partnership Agreement and the applicable provisions of Chapter 620 of the Florida Statutes.
4. All of the assets of the partnership have been liquidated, all liabilities of the partnership have been paid. After payment of all liabilities and costs of liquidation and dissolution, all of the assets of the partnership have been distributed to the Partners in accordance with their respective interests in the partnership.
5. The cancellation of the Certificate of Limited Partnership shall be effective on the date of filing of this Certificate of Cancellation with the Florida Department of State.

Signed by the General Partner of the partnership this 21<sup>st</sup> day of December, 2004.

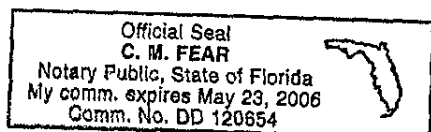
BLUE HERON GROVES, LTD.  
By its General Partner  
CITRUS CREEK, INC., a Florida  
corporation

By: W. Garvie Hall  
W. Garvie Hall, President

STATE OF FLORIDA  
COUNTY OF POLK

The foregoing instrument was acknowledged before me this 21<sup>st</sup> day of December, 2004, by W. Garvie Hall as President of Citrus Creek, Inc., a Florida corporation, the General Partner of Blue Heron Groves, Ltd., on behalf of such partnership, who is personally known to me.

(AFFIX NOTARY SEAL)



C. M. FEAR  
NOTARY PUBLIC, State at Large  
(Type or print name of Notary)  
My commission expires: