

CT CORPORATION

A 29134

CORPORATION(S) NAME

Douglas Entrance Holdings Limited Partnership

FILED
02 JUN 19 PM 2:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
02 JUN -6 PM 12:31
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

- | | | |
|---|---|---|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Foreign | <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Other |
| <input checked="" type="checkbox"/> Limited Partnership <i>Cancellation</i> | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Change of RA |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | <input type="checkbox"/> UCC |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Photocopies | <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

BK

Name _____
 Availability _____
 Document _____
 Examiner _____
 Updater _____
 Verifier _____
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6/6/02

MS.

Order#: 5396754

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-06/06/02--01051--028

Ref#: *****52.50 *****52.50

Amount: \$ _____

660 East Jefferson Street
 Tallahassee, FL 32301
 Tel. 850 222 1092
 Fax 850 222 7615

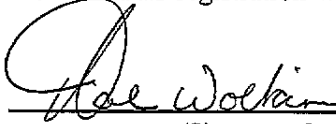
**CERTIFICATE OF CANCELLATION
FOR**

Douglas Entrance Holdings Limited Partnership

(insert name currently on file with Florida Dept. of State)

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.



(Signature of a General Partner)

DWS Florida Holdings Inc. , By: Hal Wolkin, Vice President

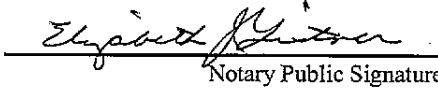
(Typed or Printed name of General Partner Signing Above)

STATE OF Connecticut

COUNTY OF Fairfield

On this 30th day of May, 2002, Hal Wolkin
personally appeared before me,

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


Notary Public Signature

Notary's Printed Name **ELIZABETH J. LISTNER**
NOTARY PUBLIC

My Commission Expires July 31, 2004

Seal

My Commission Expires: _____