

A29998

900 N. MICHIGAN AVE.
SUITE 1900
CHICAGO, ILLINOIS 60611

August 3, 1998

Florida Department of State
P.O. Box 6327
Tallahassee, FL 32314

400002609024--7
-08/06/98--01029--006
*****52.50 *****52.50

Subject: Carlyle Income Plus, Ltd.-II

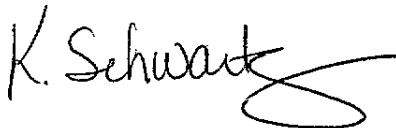
To Whom It May Concern:

00789-00707-00657-00671

Enclosed please find the Certificate of Cancellation for the above referenced limited partnership and check # 020059 in the amount of \$52.50.

Evidence of cancellation should be sent to my attention at the above address. If you should have any questions regarding this certificate, please contact the undersigned at (312) 915-1931.

Thank you,



Kim Schwartz
Legal Assistant

Enclosures

cc: Paul Nielsen

A29998

Name	Matt
Availability	Matt
Document Examiner	Matt
Updater	Matt
Updater Verifier	Matt
Acknowledgement	Matt
W. P. Verifier	Matt

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DIVISION OF CORPORATIONS
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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

August 7, 1998

KIM SCHWARTZ
CARLYLE INCOME PLUS, LTD.-II
900 N. MICHIGAN AVE., STE 1900
CHICAGO, IL 60611

SUBJECT: CARLYLE INCOME PLUS LIMITED PARTNERSHIP-II
Ref. Number: A29998

We have received your document for CARLYLE INCOME PLUS LIMITED PARTNERSHIP-II and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

The effective day must be specific and cannot be prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Michelle Hodges
Document Specialist

Letter Number: 298A00041251

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**CERTIFICATE OF CANCELLATION
FOR**

Carlisle Income Plus Limited Partnership-II
(insert name currently on file with Florida Dept. of State)

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 IL

COUNTY OF Cook

On this 28th day of August, 19 98, Kim Schwartz
personally appeared before me,

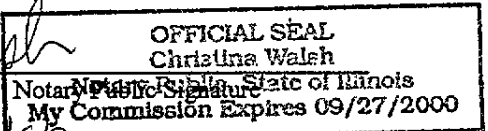


who is personally known to me

whose identity I proved on the basis of _____

Christina Walsh

Christina Walsh



Notary's Printed Name

Seal

My Commission Expires: 9/27/2000

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98 AUG 31 AM 8:58