\$ #	Passy 6m4 353	30610 Chipman Requestor's Name Secioles Address Address	01E.	
	City/St	te/Zip Phone #	Office Use Only	. <u>.</u> .
	CORPORATIO	N NAME(S) & DOCUMENT NUMBER(S), (if known):	
	1	orporation Name) (Document #	[†])	
	2(orporation Name) (Document #	<u>(</u>	
	4	orporation Name) (Document # orporation Name) (Document #	-01/05/S ****105	901162 8801119009 5.00 *****105.00
	☐ Walk in ☐ Mail out	Pick up time	SECRETAIS OF SI TALLAHASSISE, FLC	FILED 98 JAN -5 AM
	Profit	Amendment	ATE	<u>မှ</u> သ
	NonProfit	Resignation of R.A., Officer/ Director		
	Limited Liability	Change of Registered Agent Dissolution/Withdrawal		
	Domestication Other	Merger		
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- ASSETT REPORT	OTHER FILING Annual Report DCC	REGISTRATION/ QUALIFICATION		
	Fictitious Name DCC	Foreign		-
	- Name Reservation	Limited Partnership		
Verifyer DCC		Reinstatement		
Acknowledgement DCC		Trademark		
W. P. \	Verifyer DCC	Other		
CR2E031(1/95) A 30610 Examiner's Initials				

CERTIFICATE OF CANCELLATION FOR

CENPO, Ltd.
(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, hereby submits this certificate of cancellation.
FIRST: Reason for cancellation: (State why partnership is submitting cancellation)
Assets have been sold and partnership has
SECRETARY OF STATE TALLAHASSEE, FLORID
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: Abst-Sec of GHCGNPO, Inc. Corp. Gen. Portner