Sur Req	ato V Saled 2 uestor's Name	-97
City/State/2	Address Lip Phone #	Office Use Only
CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 1. PFC A-Corporation Name) (Corporation Name) (Document #)		
2. (Corporation Name) (Document #) 3. (Corporation Name) (Document #) 40002364304—8 -12/05/97-01071-006 ****367.50 ****157.50		
4. (Corporation Name) (Document #) Walk in Pick up time Certified Copy Col C Mail out Will wait Photocopy Certificate of Status		
Profit NonProfit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	Conversion of the conversion o
Annual Report Fictitious Name Name Reservation	REGISTRATION/ QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other Careellate	13:0N OF CORPORATION LP 52.50 CENT 105.00
CR2E031(1/95)	•	Examiner's Initials

CERTIFICATE OF CANCELLATION FOR

BFC/ARBOR ASSOCIATES, 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 March 15, 1991.

hereby submits this certificate of cancellation.

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

The Partnership has ceased doing business and has liquidated all of its assets.

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:

BFC/ARBORS LLC, Sole General Partner

Thomas J. Crocker

Manager

97 DEC -5 PH 2: 35
SECRETARY OF STATE
ASECRETARY OF STATE