Requester's Name 31 milk Stroot S Address Boston, Ma 0210 City/State/Zip/ Phone #	356 SECRETARY OF STATE BIVISION OF CORPORATIONS 99 DEC 17 PM 12: 10 600003074076-9 -12/17/99-01069-002 ******52.50 ******52.50
CORPORATION NAME(S) & DOCU	Office Use Only UMENT NUMBER(S), (if known):
1. (Corporation Name)	(Document #)
2. (Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4(Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait	Certified Copy Photocopy Certificate of Status
NEW FILINGS	AMENDMENTS
☐ Profit ☐ Not for Profit ☐ Limited Liability ☐ Domestication ☐ Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
☐ Annual Report ☐ Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other
CD2E021(7/07)	Examiner's Initials

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

CERTIFICATE OF CANCELLATION 99 DEC 17 PM 12: 10

ICON Cash Flow Partner (insert name currently	s, L.P., Series A y on file with Florida Dept. of State)
Pursuant to the provisions of section 620.	174, Florida Statutes, this foreign limited partnership ion in order to cancel its registration with the Florida ICON Cash Flow Partners, L.P., Series A By its General Partner, ICON Capital Corp. (Signature of a General Partner)
	Thomas W. Martin, Executive Vice President
	(Typed or Printed name of General Partner Signing Above)
STATE OF <u>Massachusetts</u>	
STATE OF <u>Massachusetts</u> COUNTY OF <u>Suffik</u>	
	
On this 3 day of December	
personally appeared before me,	
who is personally know	n to me
☐ whose identity I proved	on the basis of
	Kathrure Jean LeBlane Notary Public Signature
	KATHRIUM LEAN LEBURIX Notary's Printed Name
	• • • • • • • • • • • • • • • • • • • •

Seal

My Commission Expire KATHRINE JEAN LEBLANC, Notary Public
My Commission Expires February 4, 2005