

A93000000232

Carillon Limited Partnership I

Requestor's Name

600 E Las Colinas Blvd., Ste 1800

Address

Irving Tx 75039

City/State/Zip

Phone #

200002068242--1

-01/24/97--01076--018

\*\*\*\*105.00 \*\*\*\*105.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT 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 \_\_\_\_\_

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

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97 JAN 23 AM 11:20

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NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input checked="" type="checkbox"/>	Amendment <i>Cancellation</i>
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

C. TAX \_\_\_\_\_  
FILING 52.50  
R. AGENT FEE \_\_\_\_\_  
C. C. 52.50  
TOL \_\_\_\_\_  
N. C. \_\_\_\_\_  
BALANCE DUE \_\_\_\_\_  
REFUND \_\_\_\_\_

A93000000232

Examiner's Initials

dcc



**FLORIDA DEPARTMENT OF STATE**  
**Sandra B. Mortham**  
Secretary of State

January 3, 1997

**CARILLON LIMITED PARTNERSHIP I**  
**600 E. LAS COLINAS BLVD., STE 1800**  
**IRVING, TX 75039**

**SUBJECT: CARILLON LIMITED PARTNERSHIP I**  
**Ref. Number: A93000000232**

We have received your document for CARILLON LIMITED PARTNERSHIP I, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$52.50.

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 (904) 487-6913.

Diane Cushing  
Corporate Specialist

Letter Number: 097A00000236

**CERTIFICATE OF CANCELLATION  
FOR**

Carrillon Limited Partnership I (A93000000232)

(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.

Carillon Limited Partnership I

By: JPI Carillon, L.P., general partner

By: Carmil Capital Corporation, a Texas  
corporation, general partner

STATE OF Texas

By: C. Christopher Harris

C. Christopher Harris  
Senior Vice President

COUNTY OF Dallas

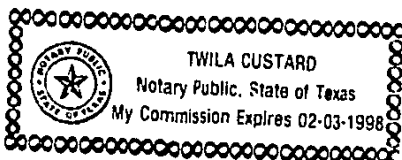
On this 18th day of December, 19 96, C. Christopher Harris  
personally appeared before me,



who is personally known to me



whose identity I proved on the basis of



Twila Custard

Notary Public Signature

Notary's Printed Name

Seal

My Commission Expires: \_\_\_\_\_

FILED  
JAN 23 AM 11:20  
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