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City State Zip	Phone		-12/307/ *****5	97N1N6201
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## CERTIFICATE OF CANCELLATION FOR

(Insert name currently on file	with Florida Dept. of State)
Pursuant to the provisions of section 620.113, Florida Sta was filed with the Florida Department of State on	tutes, this Florida limited partnership, whose certificate e 13, 1994, hereby submits this
FIRST: Reason for cancellation: (State why partnership	is submitting cancellation)
The partners wish to cancel the partne the assets have been sold and the purp accomplished.	rship because substantially all ofose of the partnership has been
*	
•	
<b>SECOND:</b> This certificate of cancellation shall be effection of State.	ve at the time of its filing with the Florida Department
THIRD: Signatures of all general partners:	•
Adam McGavin,	Janu III