

# A95000000932

Requestor's Name  
**Daniel Hotte**  
Address  
**8890 W. Oakland Park Blvd. #201**  
City/State/Zip Phone #  
**Sunrise, FL 33351**

900002446019--9  
-03/03/98--01090--001  
\*\*\*\*\*52.50 \*\*\*\*\*52.50

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

900002446019--9  
-03/03/98--01090--002  
\*\*\*\*\*52.50 \*\*\*\*\*52.50

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 MAR +5 PM 12:57

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 type="checkbox"/>	Amendment
<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

VOLUNTARY CANCELLATION

Name Availability	A95000000932	
Document Examiner	GSH	
Updater	GSH	
Updater Verifier	GSH	
Acknowledgement	GSH	
W. A. Verifier	GSH	

Examiner's Initials

**CERTIFICATE OF CANCELLATION  
FOR**

Blocheros II, 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 6/21/1995, hereby submits this certificate of cancellation.

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

*Property was sold December 1997.*

**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:

*[Signature]*

*Edwin USA Inc*

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