

ROGERS, TOWER, BAY & JONES & GIL

(Requestor's Name)

106 South Monroe St. - 2nd Floor

(Address)

Tallahassee, FL 32301 222-7200

(City, State, Zip)

(Phone #)

Call Pat if problems. @ 222-7200

OFFICE USE ONLY

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
97 MAR 21 PM 1:30

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

1. CFP, Ltd. A95000001262
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #) 600002123636--3
-03/25/97--01058--011

3. _____
(Corporation Name) (Document #) 600002123636--3
-03/25/97--01058--012
****105.00 ****105.00

4. _____
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 3/21/97

☒ Certified Copy (2)

☐ Mail out ☐ Will wait ☐ Photocopy

☐ Certificate of Status

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

TAX
FILING 52.50
R. AGENT FEE
C. COPY 115.00
TOTAL 157.50
N. BANK
BALANCE DUE
REFUND
Examiner's initials

**CERTIFICATE OF CANCELLATION
OF THE
CERTIFICATE OF LIMITED PARTNERSHIP
OF
CFP, LTD.**

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STATE
SECRETARY OF CORPORATIONS
97 MAR 21 PM 1:31

Pursuant to the provisions of Section 620.113, Florida Statutes, the undersigned, being the sole General Partner of CFP, Ltd., a Florida limited partnership, and being desirous of terminating the limited partnership, does hereby file this Certificate of Cancellation of the Certificate of Limited Partnership of CFP, Ltd., and does hereby certify as follows:

FIRST: The name of the limited partnership is CFP, LTD.

SECOND: The date of filing of the Certificate of Limited Partnership with the Florida Secretary of State for this limited partnership was August 24, 1995.

THIRD: The purpose of this document is to cancel this limited partnership's Certificate of Limited Partnership with the Florida Secretary of State.

FOURTH: The limited partnership's Certificate of Limited Partnership is cancelled pursuant to Section 620.157(3), Florida Statutes, since all of the partners of the partnership agreed to dissolve the limited partnership and have given written consent to the dissolution of this limited partnership and since all of the assets of the limited partnership were distributed and all affairs of this limited partnership were wound up prior to January 1, 1997.

FIFTH: The cancellation of the limited partnership's Certificate of Limited Partnership shall be effective upon the filing of this Certificate of Cancellation with the office of the Florida Secretary of State.

The execution of this statement by the undersigned sole General Partner of CFP, Ltd., constitutes an affirmation under penalties of perjury that the facts stated herein are true.

SIGNED this 16th day of March, 1997.

GENERAL PARTNER:

By: 

Felix A. Crawford
Sole General Partner of CFP, Ltd.