

A9500 000163D

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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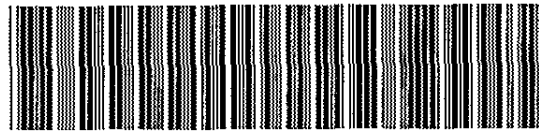
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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AND  
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DECEMBER 31 PM 1:28 RECEIVED  
STATE OF FLORIDA  
TALLAHASSEE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA  
2015-21  
12-31-21

CT CORPORATION

December 31, 2002

Secretary of State, Florida  
409 East Gaines Street  
Tallahassee FL 32399

Re: Order #: 5757080 SO  
Customer Reference 1:  
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Faison-Waterford Lakes Village Limited Partnership (FL)  
Cancellation  
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Jeffrey J Netherton  
Sr. Fulfillment Specialist  
Jeff\_Netherton@cch-lis.com

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel. 850 222 1092  
Fax 850 222 7615

02 DEC 31 PM 1:28  
SECRETARY OF STATE  
TALLAHASSEE, FL 32399

**CERTIFICATE OF CANCELLATION  
FOR**

FAISON-WATERFORD LAKES VILLAGE LIMITED PARTNERSHIP

(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 10-26-1995, hereby submits this certificate of cancellation.

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

No longer transacting business in Florida.

**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:

FAISON CAPITAL DEVELOPMENT, LLC, its sole General Partner

*Billie R. Whitaker*

By: Billie R. Whitaker

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FALLS CREEK, FLORIDA

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