

A96000 000369

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

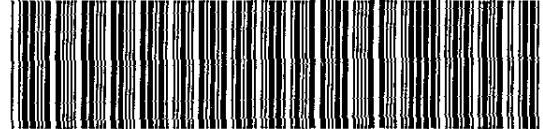
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/02/03--01048--009 **52.50

AND
FILED
03 APR -2 AM 8:35
CLERK OF DISTRICT COURT
CALLAHAN COUNTY, FLORIDA

4-3-23



ONE HICKORY CENTRE
1800 VALLEY VIEW LANE
SUITE 300
DALLAS, TEXAS 75234
469-522-4200 / FAX 469-522-4360

March 26 2003

VIA CERTIFIED MAIL
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: IS II Seville Associates, Ltd.

To Whom It May Concern:

Enclosed please find the following:

1. Two original, executed Certificates of Cancellation for the above-listed limited partnership; and
2. Check number 202840 in the amount of \$52.50.

Please cancel the limited partnership and send me confirmation of cancellation to either of the fax number or address listed above. Feel free to give me a call at (469) 522-4369 if you have any questions.

Very truly yours,

Staci L. Kimmel
Paralegal

APPROVED
AND
FILED
03 APR -2 AM 8:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF CANCELLATION
FOR**

IS II Seville Associates, 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 02-26-96, hereby submits this certificate of cancellation.

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

This entity is no longer doing business.

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:



Robert A. Waldman, Secretary of the G.P.

FILED
APR 2 2003
03 APR -2 AM 8:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA