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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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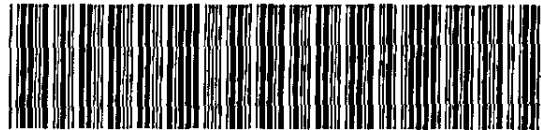
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Cust

Carol Dougherty, General Partner
Dougherty Family Limited Partnership
218 Lower Falls Drive
Black River Falls, WI 54615

December 28, 2004


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

Dear Sir or Madam:

Enclosed please find the completed Certificate of Cancellation for the Dougherty Family Limited Partnership. Also included is the cancellation fee in the amount of \$52.50.

You may contact me at the above address or at 715-284-9575.

Sincerely,


Carol Dougherty, General Manager

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**CERTIFICATE OF CANCELLATION
FOR**

Dougherty Family 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 02-13-96, hereby submits this certificate of cancellation.

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

All partners voted in the affirmative to terminate the partnership.

As of the end of 2004, the partnership will have no assets.

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:

Carol Dougherty

Carol Dougherty, General Manager

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