

A 96000001052

Ms. Marjorie A. Fox  
1203 8th Street  
New Orleans, LA 70115-3332

City/State/Zip

Phone #

300005289093--3  
-04/17/02--01032--004  
\*\*\*\*\*52.50 \*\*\*\*\*52.50

Office Use Only

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

1. FOX PARTNERS, LTD.  
(Corporation Name) (Document #)

2. A96-1052  
(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

**NEW FILINGS**

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

**AMENDMENTS**

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

**OTHER FILINGS**

- ☐ Annual Report
- ☐ Fictitious Name

**REGISTRATION/QUALIFICATION**

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

02 APR 17 AM 10:53

LCY/23

2p

Examiner's Initials

**CERTIFICATE OF CANCELLATION  
FOR**

**FOX PARTNERS, LTD.**

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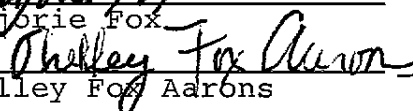
(Insert name currently on file with Florida Dept. of State)

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 May 31, 1996, hereby submits this certificate of cancellation.

**FIRST:** Reason for cancellation: (State why partnership is submitting cancellation)  
The partnership has ceased all business activities.

**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:

  
\_\_\_\_\_  
Marjorie Fox  
  
\_\_\_\_\_  
Shelley Fox Aaron

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