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- (R	equestor's Name)		
(A	ddress)		
(Address)			
(/ ludic33)			
	ity/State/Zip/Phone #)		
(C	ity/State/Zip/Prione #)		
PICK-UP	MAIT	MAIL	
(B	usiness Entity Name)		
(Document Number)			
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Certified Conjes	Certificates of	Statue	
Certified Copies Certificates of Status			
Special Instructions to	Filing Officer:		
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COVER LETTER

TO: Registration Section Division of Corporat	ions		
SUBJECT: WELP GOLF	NVESTMENT, LTD.		
	imited Partnership or Limited	d Liability Limited Partnership)	
The enclosed Notice of Can-	cellation and fee(s) are s	ubmitted for filing.	
Please return all corresponde	ence concerning this mat	iter to:	
ROY VILLAREAL			
(Cont	act Person)		
ESTEIN USA			
(Firm	/Company)		
4705 S. APOPKA VINELAND F	RD., SUITE 201		
(/	Address)		
ORLANDO, FL 32819			
(City, Star	e and Zip Code)		
For further information cond	cerning this matter, pleas	e call:	
ROY VILLAREAL	at (909-2200	
(Name of Contact Perso		rea Code and Daytime Telephone Number)	
Enclosed is a check for the f	Collowing amount:		
and		00 Filing Fee Certified Copy Certified Copy, and Certificate of Status	
Mailing Address:		Street Address:	
Registration Section Division of Corporations		Registration Section Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	
Tallahassee, FL 32314 241:		2415 N. Monroe Street, Suite 810	
		Tallahassee, FL 32303	

NOTICE OF CANCELLATION FOR FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

WELP G	OLF INVEWSTMENT, LTD.	
(Name of foreign limited p	artnership or limited liability lin	nited partnership)
	A97000000042	
(Florida Docume	nt Number of the Foreign LP or	LLLP)
	FLORIDA	2022
(1	urisdiction of formation)	-
	01/03/1997	. 12
(Date author	zed to transact business in Floric	da)
This foreign limited partnership or transacting business in Florida and s. 620.1907, F.S.	imited liability limited part vishes to cancel its certifica	က္ nership is no longer မာ ate of authority pursuant to
This entity appoints the Florida Deprights of action arising out of the tra	_	
Effective date, if other than the date (Effective date cannot be prior to nor more Department of State.)		·
NOTE: If the date inserted in this requirements, this date will not be l Department of State's records.		
Signature of a general partner:		
Typed or printed name:		
LOTHAR ESTEIN	 	
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75	