

A97000001987

Requester's Name
 36555 U.S. Highway 19 North
 Address
 Palm Harbor, Fl. 34684
 City/State/Zip Phone #

500003235105--3
 -05/02/00-01043-020
 *****25.00 *****25.00

Office Use Only

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

1. _____ (Corporation Name) _____ (Document #)
 500003235105--3
 -05/23/00-01125-013
 *****27.50 *****27.50
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
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- Walk in Pick up time Certified Copy
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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

A97-1987

OTHER FILINGS

- Annual Report
 Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
 Limited Partnership
 Reinstatement
 Trademark
 Other

Name Availability	25-23
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Acknowledgement	
Examiner's Initials	



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

May 9, 2000

WORLD WELLNESS CENTER LIMITED PARTNERSHIP #1
36555 U.S. HIGHWAY 19 NORTH
PALM HARBOR, FL 34684

SUBJECT: WORLD WELLNESS CENTER LIMITED PARTNERSHIP #1
Ref. Number: A97000001987

We have received your document for WORLD WELLNESS CENTER LIMITED PARTNERSHIP #1 and check(s) totaling \$25.00 of which \$ has been designated to file this document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is an additional amount of \$27.50 due. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6020.

Tammi Cline
Document Specialist

Letter Number: 500A00025696

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TALLAHASSEE, FLORIDA

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**CERTIFICATE OF CANCELLATION
FOR**

World Wellness Center Limited Partnership #1

(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 9/16/97, hereby submits this certificate of cancellation.

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

Partnership failed to make a profit

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: *only one*

[Signature]

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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