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## **COVER LETTER**

TO: Registration Se Division of Co			
SUBJECT: IDP IN	/ESTMENT GROUP LT	TD. LLP	
Sobseci.		f Limited Partnership)	<del></del>
DOCUMENT NUMBI	ER: #A9700002296		
The enclosed Certificate	e of Cancellation and fee(s) are	submitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	MONICA I. DALTON		
(Name of Person)		<del></del>	
			W 5
_		Firm/Company)	2005 DEC 14 PH 2: 55 2005 DEC 14 PH 2: 55
	(	r in b Company)	<b>一种</b>
236-A 8TH AVENUE NE		三至三	
		(Address)	SSE SSE
	ST PETERSBURG FLO	IRIDA 33701	10000000000000000000000000000000000000
ST. PETERSBURG, FLORIDA 33701 (City/State and Zip Code)		- 106	
			Section of
For further information	concerning this matter, please c	all:	
		707 004 0055	
Monica I. D	(Name of Person)	at () 821-9655 (Area Code & Daytime Telephone Number)	
	(a table of a discon)	(case some say mile some	,
Enclosed is a check for	the following amount:		
\$52.50 Filing Fee	\$61.25 Filing Fee & Certificate of Status	Certified Copy Certification (additional copy is enclosed) Certification	5 Filing Fee, icate of Status & fied Copy ional copy is enclosed)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	

Tallahassee, Florida 32301

## CERTIFICATE OF CANCELLATION FOR

IDP INVESTMENT GROUP LTD, LLP.
(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 October 23, 1997, hereby submits this Certificate of Cancellation.

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

Due to the declining health of one of the general partners plus the desire of the general partners to pursue individual investment opportunites, the partnership has decided to liquidate all assests and dissolve the partnership.

**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:

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DIVUSE N. A. SUMPLIKATION
TALLAHASSEE, FLORIDA