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| (Re | equestor's Name) | | | |
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| (Ac | ldress) | <u></u> | | |
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COVER LETTER

| Division of | n Section Corporations | | | | |
|--|---|---------------------------------------|--|-----------------------|------------------|
| SUBJECT: | CN Pacms | LTD. | | | |
| (Name o | of Florida Limited Partnersl | nip or Limited Liability Lin | nited Partnership) | _ | |
| The enclosed Certi | ficate of Dissolution a | nd fee(s) are submitted | for filing. | | |
| Please return all co | rrespondence concerni | ng this matter to: | | | |
| RosenBi | (Contact Person) (Contact Person) (Firm/Company) (Firm/Company) (Address) | | | | |
| · | (Contact Person) | | | | |
| Speraw. | · dRepl Gsra | 70 SENU-LES | | | |
| | (Firm/Company) | <u> </u> | | | |
| 146 Pine | Grove Craela | ,5-10- 200 | | 2006 | IVIO IS |
| | (Address) | | | 30 | |
| Your Pa | 17403 | | | 2006 OCT 24 PH 12: 24 | E TAP |
| | (City, State and Zip Code) | | | - | (1997) (1997) |
| | | | | <u> </u> | 73 S |
| For further informa | tion concerning this m | atter, please call: | | 2 | ME. |
| RogenBA | 23000 | at (717) S | 05-1004 x209 | , _ | ž |
| (Name of Cor | ntact Person) | (Area Code and I | Daytime Telephone Number) | _ | |
| Enclosed is a check | for the following amo | ount: | | | |
| □\$52.50 Filing Fee | \$61.25 Filing Fee and Certificate of Status | S105.00 Filing Fee and Certified Copy | \$113.75 Filing Fee, Certified Copy, and Certificate of Status | | |
| STREET ADDRE | SS: | MAILING | ADDRESS: | | |
| Registration Section | | Registration | | | |
| Division of Corpora | ations | | Corporations | | |
| Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 | | | | | |
| Tallahassee, FL 32 | | i ananassee, | , I'L 32314 | | |

CERTIFICATE OF DISSOLUTION FOR

| OCN Pai | Partnership or Limited Liability Limited Partnership) | |
|--|---|-----------------------|
| (Name of Florida Limited F | Partnership or Limited Liability Limited Partnership) | _ |
| partnership or limited liability limit | on 620.1203, Florida Statutes, this Florida limited ted partnership, whose certificate was filed with the 11-03-1997, hereby submits this | |
| FIRST: Reason for dissolution: (| State why partnership is submitting dissolution) | |
| PARTNERSh.ps | Sole Asset was Sold | |
| 11/7/04 | | - |
| | | - |
| | | - |
| | | . ~ |
| SECOND: A Notice of Dissol | lution is attached. | 0 900 |
| (Check box if attack | ched.) | 1072 |
| THIRD: Effective date, if other than the | date of filing: | 7, |
| (Effective date cannot be prior to nor more Department of State.) | e than 90 days after the date this document is filed by the Florida | 2006 OCT 24 PH 12: 24 |
| Signatures of each general partner of s. 620.1803(3) or (4), F.S.: | | ** ** |
| Saw le Vry | | |
| Harald H Hogg, Managrug M OCN Parmy, Inc - Source! | pontru | |
| | | |
| Filing Fee: | \$52.50 | |
| Certified Copy (optional): Certificate of Status (optional): | \$52.50 \$8.75 | |