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FROM: SHEAR, NEWMAN, HAHN & ROSENKRANZ, P.A.

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NAME: UNIVERSITY BEHAVIORAL HEALTH AT THE UNIVERSI

AUDIT NUMBER.....H98000016266

DOC TYPE.....VOLUNTARY CANCELLATION OF LP

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**CERTIFICATE OF CANCELLATION
FOR**University Behavioral Health at the University of South Florida, Ltd.

(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 February 4, 1998, hereby submits this certificate of cancellation.

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

The purposes for which the Partnership was formed have never materialized as originally contemplated. The Partners have consented to the dissolution.

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:

U.B.H. Holdings, L.C.

By: 
Print: Anthony Reading
As its: Vice President

Prepared by:
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