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(Requestor's Name)

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Steven H. Kane* Jeffrey M. Koltun**

*L.L.M. in Taxation Florida Board Certified in Wills, Estates and Trusts

**Also admitted in Ohio and Kentucky

KANE AND KOLTUN

ATTORNEYS AT LAW
A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS
557 NORTH WYMORE ROAD
SUITE 100

Maitland, Florida 32751
Telephone: (407) 661-1177 • Telefax: (407) 660-6031
E-Mail: lawoffices@kaneandkoltun.com

Elisa-A. Cawood***
David L. Jacquot****

***Also admitted in Kentucky and Missouri

****Also admitted in Indiana

November 10, 2004

Florida Department of State Division of Corporations Attn: Corporate Filings Post Office Box 6327 Tallahassee, Florida 32314

Re: Franklin C. Comins Family Limited Partnership

Dear Sir or Madam:

In connection with the Cancellation of Partnership in the above referenced partnership, enclosed please find the following:

- 1. Signed original Statement of Dissolution for Partnership.
- 2. Signed original Cancellation of Partnership Registration.
- 3. A check in the amount of \$25.00 payable to the Florida Department of State to cover the \$25.00 filing fee for the Statement of Dissolution for Partnership.
- 3. A check in the amount of \$25.00 payable to the Florida Department of State to cover the \$25.00 filing fee for the Cancellation of Partnership Registration.

If all is in order, please return stamped filed copies of the Statement of Dissolution for Partnership and Cancellation for Partnership in the self addressed stamped envelope provided. If you have any questions or need further information, please do not hesitate to contact me.

Sincerely,

Kane and Koltun

ENCLOSURES
CC: NANCY COTE

TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: FRANKLIN C. COMINS FAMILY LIMITED PARTNERSHIP	
(Name of Limited Partnership)	
DOCUMENT NUMBER: A9900000589	
The enclosed Certificate of Cancellation and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
STEVEN KANE, ATTORNEY (Name of Person)	
(1.11.1.5)	
KANE AND KOLTUN	_
(Firm/Company)	
557 NORTH WYMORE ROAD	
(Address)	
MAITLAND, FLORIDA 32751	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
STEVEN H. KANE, ATTORNEY at (407) 661-1177	
(Name of Person) (Area Code & Daytime Telephone Number	r)
Enclosed is a check for the following amount:	_
♥ \$52.50 Filing Fee Certificate of Status \$105.00 Filing Fee Certificate of Status \$113.75 Filing Certificate of Status \$105.00 Filing Fee Certified Copy \$113.75 Filing Certificate of Status \$113.75 Filing Certified Copy \$113.75 Filing Certificate of Status \$105.00 Filing Fee Certified Copy \$113.75 Filing Certificate of Status \$113.75 Filing Certified Copy \$113.75 Filing Fee Certifi	Status &

TO:

Registration Section

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 30, 2004

DAVID L. JACQUOT KANE AND KOLTUN 557 NORTH WYMORE ROAD, SUITE 100 MAITLAND, FL 32751

SUBJECT: FRANKLIN C. COMINS FAMILY LIMITED PARTNERSHIP

Ref. Number: A9900000589

We have received your document for FRANKLIN C. COMINS FAMILY LIMITED PARTNERSHIP and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must complete the attached form to cancel this Limited Partnership. The form submitted is for a General Partnership. Also, the filing fee is \$52.50.

There is a balance due of \$2.50.

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) 245-6967.

Letter Number: 004A00067051

Michelle Hodges Document Specialist

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

CERTIFICATE OF CANCELLATION FOR

(Insert name currently on file with Florida Dept of State)		_
Pursuant to the provisions of section 620.113, Florida Statutes, this Florida limited partrecertificate was filed with the Florida Department of State on 04/06/1999, here Certificate of Cancellation.	nership, v by subm	
FIRST: Reason for cancellation: (State why partnership is submitting cancellation) No longer conducting business activities through this entity.	Editor of Editor	04 DEC 21 PH 3:55

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:

*: Many Cote 12/13/04 Frances M. Commer 12/13/04