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To:

Division of Corporations
Fax Number : (850) 922-4003

From:

Account Name : CENTRES, INC.
Account Number : F19990000140
Phone : (305) 670-1997
Fax Number : (305) 670-4429

VOLUNTARY CANCELLATION OF LP

CENTRES GONZALES LIMITED PARTNERSHIP

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**CERTIFICATE OF CANCELLATION
FOR**

CENTRES GONZALEZ LIMITED PARTNERSHIP
(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 August 3, 1999, hereby submits this certificate of cancellation.

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

The Partnership was formed for a specific business purpose which has now been completed and concluded. There is no further need for the Partnership's continued existence.

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:

CENTRES GONZALEZ GP, INC.

By: 

David K. Charlton
Senior Vice President

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