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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Boswell Associates, Ltd.
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

APPROVED
AND
FILED
02 APR -1 AM 11:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Examiner's Initials

[Handwritten Signature]

**CERTIFICATE OF CANCELLATION
FOR**

BOSWELL ASSOCIATES, 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 8/18/1999, hereby submits this certificate of cancellation.

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

The general partners have determined that the cost of continuing the partnership consumes too great a percentage of the partnership's income, and that the interests of the general and limited partners would be better served by a cancellation and distribution of partnership assets at this time.

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:

Mary H. Boswell

Mary H. Boswell, General Partner

W P Boswell

William P. Boswell, General Partner & Trustee

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