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## TRANSMITTAL LETTER

TO: Registration S Division of Co			
SUBJECT:	Jational Collec	HOTS, LP Limited Partnership)	
FLORIDA REGISTE	2.0	0000000118	
The enclosed Certifica	te of Cancellation and fee(s) are s	ubmitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Tracy Wea	kley CFO me of Person)	- 12 9
	UC Ventures, I	nC. rm/Company)	APR 23
_1	00 Box 1068	(Address)	APR 25 PM 4: 1
	otafford, TX (City/S	77497 - 1068 late and Zip Code)	ORIDA ORIDA
For further information	n concerning this matter, please ca	ıll:	
Davis	(Name of Person)	at ( Z81 ) Z65 (Arrea Code & Daytim	5 5 3 7 8 e Telephone Number)
Enclosed is a check for	r the following amount:		
\$52.50 Filing Fee	☐ \$61.25 Filing Fee & Certificate of Status	□ \$105.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$113.75 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regi Divis 409 l	EET ADDRESS: stration Section sion of Corporations E. Gaines Street shassee, Florida 32399	MAILING ADDRE Registration Section Division of Corporat P.O. Box 6327 Tallahassee, Florida	ions

## CERTIFICATE OF CANCELLATION FOR

National Col	lectors, LP
(insert name c	urrently on file with Florida Dept. of State)
	20.174, Florida Statutes, this foreign limited partnership hereby in order to cancel its registration with the Florida Department of  (Signature of a General Partner)  Tracy Weakley  (Typed or Printed name of General Partner Signing Above)
STATE OF	
COUNTY OF	
On this 197H day of 1971 personally appeared before me, who is personally kn whose identity I pro	nown to me
	FILED  Welling on the Signature of the Notary Public Signature
MELINDA WEIKEL MY COMMISSION EXPIRES SEPTEMBER 13, 2008	Melinda Weikel  Notary's Printed Name
Seal	My Commission Expires: 9-13-0%