## B010000000003

(Requestor's Name)				
(Address)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
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(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
A. LUNT				
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SEGRETARY OF STATE TALLAHASSEE, FLORIDA

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## **COVER LETTER**

Division of	Corporations	•	
SUBJECT: LAK	E WALES VENT	TURE NO. ONE, L.P.	
(Name o	f Foreign Limited Partnersh	hip or Limited Liability Limited Partnership)	
The enclosed Notic	e of Cancellation and	fee(s) are submitted for filing.	
Please return all co	rrespondence concerni	ing this matter to:	
James Gissle	r		
	(Contact Person)		
St. Ives			
	(Firm/Company)		
16910 Dallas	Parkway #100	·	
	(Address)	·	
Dallas, Texas	75248	TALE 200	,
	(City, State and Zip Code)	SECRETARY AHASS	1
•		TASK Z	) )
For further informa	tion concerning this m	iatter, diease caii:	
D.C. Sauter		at (972 )235-7888 (Area Code and Daytime Telephone Number)	É
(Name of Cor	ntact Person)	(Area Code and Daytime Telephone Number)	u i
Enclosed is a check	for the following amo	· · · · · · · · · · · · · · · · · · ·	7
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee \$113.75 Filing Fee, Certified Copy, and Certificate of Status	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314	

## FILED

## NOTICE OF CANCELLATION FOR FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

LAKE WALES VENTURE	NO. UNE, L.P.	
(Name of limited partn	ership or limited liability limited	partnership)
TEXAS		77.2
(Ji	risdiction of formation)	
1/22/2001		
(Date authori	zed to transact business in Florid	a) SSEE.
This foreign limited partnership or l transacting business in Florida and vs. 620.1907, F.S.	• •	
This entity appoints the Florida Deprights of action arising out of the tra	_	
Effective date, if other than the date (Effective date cannot be prior to nor more Department of State.)		locument is filed by the Florida
Signature of a general partner.	el_	
Typed or printed name:		
James E. Gissler	·	
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75	•