(Requestor's Name)	
(Address)	300344020623
(Address)	
(City/State/Zip/Phone #)	05/07/2001013018 **105.00
(Business Entity Name)	- 2021
(Document Number)	
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I ALBRITTON

COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT: Ballast Point Ventures EF LP

(Name of Foreign Limited Partnership or Limited Liability Limited Partnership)

The enclosed Notice of Cancellation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

_CAROL	Beah	
Ballast	Point Ventures	
401 Eas	(Firm/Company) + Jackson St, Ste 230	00
	(Address)	
Tamba	(City, State and Zip Code)	

For further information concerning this matter, please call:

at (

(Name of Contact Person)

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

S52.50 Filing Fee

S61.25 Filing Fee and Certificate of Status and Certified Copy

S113.75 Filing Fee, Certified Copy, and Certificate of Status

STREET ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32304

MAILING ADDRESS:

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

NOTICE OF CANCELLATION FOR FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP Ralla<u>st</u> Ventules (Name of limited partnership or limited liability limited partnership) Jawape Jurisdiction of formation 600 (Date authorized to transact business in Florida)

This foreign limited partnership or limited liability limited partnership is no longer transacting business in Florida and wishes to cancel its certificate of authority pursuant to *s*. 620,1907, F.S.

This entity appoints the Florida Department of State as its agent for service of process for rights of action arising out of the transaction of business in this state.

Effective date, if other than the date of filing: <u>OSJO4J</u> <u>aDaO</u>. (Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

> 5 9 0

Signature of a general partner: XX-Typed or printed name: ohan

Filing Fee:\$52.50Certified Copy (optional):\$52.50Certificate of Status (optional):\$8.75

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