B02000000166

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100244453211

MAR - 6 2013 T. HAWFTO.



ACCOUNT NO. : I2000000195			
REFERENCE : 559098 7736905			
AUTHORIZATION: Syrellocke man			
COST LIMIT : \$ 52.50			
ORDER DATE: March 5, 2013			
ORDER TIME : 2:58 PM			
ORDER NO. : 559098-020			
CUSTOMER NO: 7736905			
FOREIGN FILINGS			
NAME: CMS OAKLEIGH PARCELS PARTNERS, L.P.			
CORPORATE XX LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY			
XXXX WITHDRAWAL/CANCELLATION			
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:			
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF STATUS			
CONTACT PERSON: Susie Knight - EXT# 52956			
EXAMINER:			

NOTICE OF CANCELLATION

FOR-

FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

CMS OAKLEIGH PARCELS I	PARTNERS, L.P.	
(Name of limited partner	ship or limited liability limited partnership)	
DELAWARE		
(Juri	isdiction of formation)	
05/17/2002		
(Date authorize	ed to transact business in Florida)	
	nited liability limited partnership is no longer ishes to cancel its certificate of authority pursuant to	
This entity appoints the Florida Departights of action arising out of the trans	rtment of State as its agent for service of process for saction of business in this state.	
Effective date, if other than the date o Effective date cannot be prior to nor more th Department of State.)	of filing: than 90 days after the date this document is filed by the Florida	
Signature of a general partner:		
Typed or printed name: Donna M. Rittershausen	V.P. of G.P.: CMS Oakleigh Parcels	Asso. L.P.
Filing Fee: Certified Copy (optional):	\$52.50 \$52.50 \$8.75	DIVISION OF THE