B02000000328

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Basilios Lillity Hallis)
(Document Number)
Certified Copies Certificates of Status
1
Special Instructions to Filing Officer:
A. LUNT
JAN 1 1 2008
EXAMINER

Office Use Only



000114513580

01/10/08--01034--001 **52.50

COVER LETTER

TO: Registration Section Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

SUBJECT: Decade Companies Preferred Placement VIII, a Limited Partnership

(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:

Michael Sw	eet			
	(Contact Person)			
Decade Com	·	d Placement VII	I, a Limited Partn	ership
	(Firm/Company)			
N19 W2413	0 Riverwood [Drive, Ste. 100		
Waukesha,	WI 53188		2000 JAN 10 SECRETARY ALLAHASSE	
	(City, State and Zip Code)		AR) (SSI	
For further informa	tion concerning this m	• •	22-8990	
(Name of Contact Person)		/	Daytime Telephone Number)	_
•	for the following amo	•	, , , , , , , , , , , , , , , , , , ,	
✓ \$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy	\$113.75 Filing Fee, Certified Copy, and Certificate of Status	
STREET ADDRESS:		MAILING	ADDRESS:	
Registration Section		Registration Section		
Division of Corporations		Division of Corporations		

P. O. Box 6327

Tallahassee, FL 32314

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

Decade Companies Preferred Placement VIII, a Limited Partnership

(Name of limited partnership or limited liability limited partnership)

(Jurisdiction of formation)

Wisconsin

July 2, 2002					
(Date author	ized to transact	business in Florida)			
This foreign limited partnership or transacting business in Florida and s. 620.1907, F.S.					to
This entity appoints the Florida Derrights of action arising out of the tra				rocess fo	or .
Effective date, if other than the date (Effective date cannot be prior to nor more Department of State.) Signature of a general partner: Typed or printed name: Jeffrey Keierleber	of filing: 12 than 90 days a	2/31/2007 fter the date this docum	TALLAMASSEE, FLORIDA	TIGOTO DIE 52	
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75				