

Bo 3000000 154

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

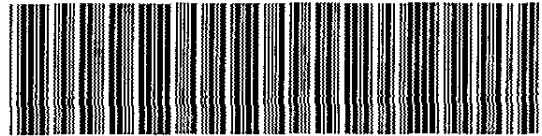
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 APR 19 AM 8:32

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11621 Kew Gardens Avenue  
Suite 210  
Palm Beach Gardens, FL 33410  
561/622-8343 Phone  
561/622-8455 Fax

**North Shore Capital  
Management, L.L.C.**

# Memo

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**To:** Registration Section  
Florida Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**From:** Ed Chestolowski

**CC:** File

**Date:** April 16, 2004

**Re:** Certificate of Cancellation

Please find enclosed the Certificate of Cancellation for the following limited partnerships:

- |                       |                   |
|-----------------------|-------------------|
| • Thornberry Hill, LP | Bayview Hill, LP  |
| • Eagle Hill, LP      | Belmont Ridge, LP |
| • Arcadia Hill, LP    | Boulder Hill, LP  |
| • Arrowhead Hill, LP  | Clear Canyon, LP  |
| • Aurora Hill, LP     | Coray Cay, LP     |
| • Red Cedars, LP      |                   |

Please provide a certified copy of the cancellation certificate for each entity. Enclosed please find a check for \$105 for each entity. This includes the \$52.50 fee for each certified copy. Please send the cancellation certificate back to us via Federal Express, using our account #229631802.

Please contact me if you need anything further.

Thank you.


  
Ed Chestolowski

**CERTIFICATE OF CANCELLATION  
FOR**

CORAL CAY, L.P.

(insert name currently on file with Florida Dept. of State)

Pursuant to the provisions of section 620.174, Florida Statutes, this foreign limited partnership hereby submits this certificate of cancellation in order to cancel its registration with the Florida Department of State.



(Signature of a General Partner)

DOUG REICH

HERITAGE HILL, L.L.C.

(Typed or Printed name of General Partner Signing Above)

STATE OF FLORIDA

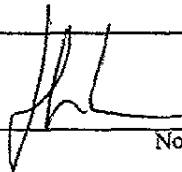
COUNTY OF PALM BEACH

On this 15<sup>th</sup> day of APRIL, 2004, DOUG REICH  
personally appeared before me,

- ☒ who is personally known to me  
☐ whose identity I proved on the basis of \_\_\_\_\_



Jennifer L. Rosen  
My Commission DD162599  
Expires November 03, 2006



Notary Public Signature

\_\_\_\_\_  
Notary's Printed Name

Seal

My Commission Expires: \_\_\_\_\_

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CLERK OF  
DEPT. OF  
STATE  
TALLAHASSEE, FLORIDA