

(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



000362874150

notice or Cancellation

04/05/21--01089--008 ***1.25

JUN 0 3 2021 A RAMSEY

COVER LETTER

TO: Registration				
Division of C	Corporations			
SUBJECT:	getoon Cui	15.LP		
(Name of	Foreign Limited Partnersh	ap or Limited Lizbility Lim	ited Partnership)	
The enclosed Notice	of Cancellation and f	fee(s) are submitted for	filing.	
Please return all corr	respondence concernia	ng this matter to:		
KAthl.	een Perk (Contact Person)	caL		
	(Contact Person)			
<i>CF</i> £	Firm/Company)	LP		
	(Firm/Company)			
7901 41	151. N ste	2 300 / 4657	و	
	(Address)	/		
7901 4 th St. N Ste 300 / 4657 (Address) St. Petersburg, FL 33702 (City. Sizze and Zip Code)				
(City, Sizze and Zip Code)				
	v			
For further information concerning this matter, please call:				
KAthlee	n PerkuL	at ()	nytime Telephone Number)	
(Name of Conta	ect Person)	(Area Code and D	sytime Telephone Number)	
Enclosed is a check for the following amount:				
S52.50 Filing Fee	Sol 25 Filing Fee and Certificate of Status	S105.00 Filing Fee and Certified Copy	S113.75 Filing Fee, Certified Copy, and Certificate of Status	
Mailing Address: Registration Section Division of Corporate P.O. Box 6327 Fallahassee, FL 3231		Street Addre Registration: Division of C The Centre o 2415 N. Mon Tallahassee.	Section Corporations f Tallahassee roe Street, Suite 810	

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



CARtoon Cuts LP
(Name of foreign limited partnership or limited liability limited partnership)
<u>B0300000297</u>
(Florida Document Number of the Foreign LP or LLLP)
Delaware
(Jurisdiction of formation)
8/17/2003
(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:

(Effective date cumos be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

NOTE: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signature of a general partner:

Typed or printed name:

Kathleen M. Perkal

Filing Fee: \$52.50

Certificate of Status (optional): \$52.50 Certificate of Status (optional): \$8.75