

B04000000171

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_



500039610625

09/27/04--01006--020 \*\*105.00

Special Instructions to Filing Officer:

- Office Use Only

FF \$52.50  
cc 52.50

SEP 27 2004  
10 45  
STONING

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RS PARTNERS, LP  
(Name of Limited Partnership)

**FLORIDA REGISTRATION NUMBER:** B04000000171

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

Please return all correspondence concerning this matter to the following:

Shelley Kaye  
(Name of Person)

Greenberg Traurig, P.A.  
(Firm/Company)

5100 Town Center Circle  
(Address)

Boca Raton, FL 33486  
(City/State and Zip Code)

For further information concerning this matter, please call:

Shelley Kaye at ( 561 ) 995 7618  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$52.50 Filing Fee
- \$61.25 Filing Fee & Certificate of Status
- \$105.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$113.75 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

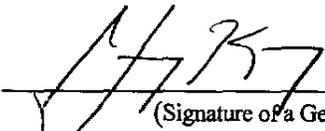
**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**CERTIFICATE OF CANCELLATION  
FOR**

RS PARTNERS, LP

(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)

Gary L. Kay

(Typed or Printed name of General Partner Signing Above)

STATE OF FLORIDA

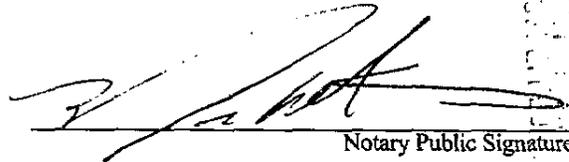
COUNTY OF PALM BEACH

On this 17 day of September, 2004,  
personally appeared before me,

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



Michael W. Kirshon  
Commission #DD275002  
Expires: Jan 24, 2008  
Bonded Thru  
Atlantic Bonding Co., Inc.

  
\_\_\_\_\_  
Notary Public Signature

Michael W. Kirshon  
\_\_\_\_\_  
Notary's Printed Name

Seal

My Commission Expires: 1/24/08