B06000000124

(Re	equestor's Name)	
(Ac	ldress)	,
(Ac	ddress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	e)
(Dc	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
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wrong fore	<u> </u>	
f	Office Use Only	, .



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K.SALY EXAMINER MAY 22 2015

FLORIDA DEPARTMENT OF STATE A Division of Corporations

April 28, 2015

BRIDGETON PROPERTIES JOHN MALEK 9891 N US HWY 1 SEBASTIAN, FL 32958

SUBJECT: OSLO COMMERCE CENTER, LP

Ref. Number: B06000000124

We have received your document for OSLO COMMERCE CENTER, LP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II

Letter Number: 715A00008658

5 HAY 19 PM 4:2

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: OS/o Commerce Center, LP (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:		
Contact Person) Bridgeton Properties (Firm/Company)		
(Firm/Company) 989/ N US Huy/ (Address) Sobastian, FL 32958 (City, State and Zip Code)		
Sebastian, FL 32958		
(City, State and Zip Code)		
For further information concerning this matter, please call:		
Sue Valen2a at (772) 388-1082 (Name of Contact Person) (Area Code and Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$52.50 Filing Fee and Certificate of Status \$105.00 Filing Fee \$113.75 Filing Fee, Certified Copy, and Certificate of Status		
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314		

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

400



,
(Name of limited partnership or limited liability limited partnership)
(Name of limited partnership or limited liability limited partnership)
(Jurisdiction of formation)
(Jurisdiction of formation)
(Date authorized to transact business in Florida)
(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:
Signature of a general partner:
Typed or printed name:
John Malek.
Filing Fee: \$52.50 Certified Copy (optional): \$52.50

\$8.75

Certificate of Status (optional):