

(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:
·





200125814252

04/28/08--01040--022 **52.50

08 APR 28 PH 2: 50
SECRETARY OF STATE
SECRETARY OF STATE

COVER LETTER

TO: Registration Division of C			
SUBJECT: NC T	WO, L.P. Foreign Limited Partnersh	ip or Limited Liabilit	y Limited Partnership)
The enclosed Notice	of Cancellation and f	ee(s) are submitte	d for filing.
Please return all corn	respondence concerni	ng this matter to:	
Tracy Weakley			
	(Contact Person)		
NC Ventures, I	nc.		
	(Firm/Company)		
PO Box 1068			
	(Address)		
Stafford, TX 7	7497-1068		
	City, State and Zip Code)		
For further informat	ion concerning this ma	atter, please call:	
Tracy Weakley		at (281	265-5328 x315
(Name of Contact Person) (Area Code and Daytime Telephon		and Daytime Telephone Number)	
Enclosed is a check	for the following amo	unt:	
✓ \$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing I and Certified Copy	
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	

7,1,

FILED

08 APR 28 PM 2: 50

SECRETARY OF STATE TALLAHASSEE FLORIDA

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

NC Two, L.P.
(Name of limited partnership or limited liability limited partnership)
Delaware
(Jurisdiction of formation)
June 12, 2006
(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: upon filing (Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)
Signature of a general partner: For NCVentures, Inc.
Typed or printed name:
Tracy Weakley, SVP, CFO NC Ventures, Inc.
Filing Fee: \$52.50 Certified Copy (optional): \$52.50

\$8.75

Certificate of Status (optional):