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:	(Requestor's Name)
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PICK	-UP WAIT MAIL
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:	(Business Entity Name)
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:	(Document Number)
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Certified Copies _	Certificates of Status
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Special Instruction	ons to Filing Officer:
	A
	A. LUNT
! :	MAY - 8 2009
:	EXAMINER
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Office Use Only



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2009 MAY -6 AM II: 36 SECRETARY OF STATE ALLAHASSEE, FLORIDA

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COVER LETTER

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Tallahassee, FL 32301

TO:	Registration	n Section	
	Division of	Corporations	
SÜŔ	ECT. RDS	S Family Partne	ership, LLLP デジェフ
	(Name o	f Foreign Limited Partners	hip or Limited Liability Limited Partnership)
The e	nclosed Notic	ce of Cancellation and	fee(s) are submitted for filing.
Please	e return all co	orrespondence concerni	fee(s) are submitted for filing.
Rel	oecca Sn	nith	
		(Contact Person)	
RD:	S Family	Partnership, L	LLP
-	······································	(Firm/Company)	
194	8 Kentla	nd Place	
		(Address)	
Atla	inta, GA	30345	
J.W	17/71 15-18 o	(City, State and Zip Code))
		ation concerning this m	atter please call
	_	_	
Rot	pert Petr		at (770) 724-0307
	(Name of Co	ntact Person)	(Area Code and Daytime Telephone Number)
Enclo	sed is a checl	k for the following amo	ount:
\$ \$52.	50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee \$113.75 Filing Fee, Certified Copy, and Certificate of Status
STRI	EET ADDRE	ESS:	MAILING ADDRESS:
Registration Section			Registration Section
Division of Corporations			Division of Corporations
Clifton Building			P. O. Box 6327
2661 Executive Center Circle		enter Circle	Tallahassee, FL 32314

FILED

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

RDS Family Partnership, LLLP
(Name of limited partnership or limited liability limited partnership)
Snellville, GA
(Jurisdiction of formation)
12/12/08
(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 purguant 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: 4/29/09 (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: Typed or printed name: Rebecca M. Smith
Filing Fee: \$52.50
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75