BIOD	000190
(Requestor's Name) (Address) (Address)	500221167065
(City/State/Zip/Phone #)	02/13/1201012011 ** 52.50
Special Instructions to Filing Officer:	12 FEB 13 PH 1:41 ALLAHASSEE, FLORIDA

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G. MCLEOD FEB 1 4 2012 EXAMINER

COVER LETTER

TO: **Registration Section Division of Corporations**

: <u>Lmpact Forex</u> Opportunitie (Name of Foreign Limited Partnership or Limited Liability Limited Partnership) LP SUBJECT: The enclosed Notice of Cancellation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Ken Christian
(Contact Person)
Impact Asset Management, LLC
(Firm/Company)
2817 NE 32nd St.
(Address)
(City, State and Zip Code)
(City, State and Zip Code)

For further information concerning this matter, please call:

(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

\$52.50 Filing Fee

\$61.25 Filing Fee and Certificate of Status

\$105.00 Filing Fee and Certified Copy

\$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

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

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<u>Impact Forex</u> Opportunities, LP (Name of limited partnership or limited liability limited partnership)
(Name of limited partnership or limited liability limited partnership)
Delaware
(Jurisdiction of formation)
October 11, 2011

(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 cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

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Signature of a general partner:

Typed or printed name:

Filing Fee:\$52.50Certified Copy (optional):\$52.50Certificate of Status (optional):\$8.75