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COVER LETTER

TO:	Registration S Division of C							
SUBJI		ted Systems, LF		mited Liabili	ty Lin	nited Partnership)	······································	
The en	aclosed Notice	of Cancellation and fo	ee(s) a	are submitte	ed fo	r filing.		
Please	return all corr	espondence concernin	g this	matter to:				
Caro	ol H. South	wood			_			
***************************************		(Contact Person)			_			
Sevf	arth Shaw	LLP						
	· · · · · · · · · · · · · · · · · · ·	(Firm/Company)					.=1	~
1075	5 Peachtre	e Street NE, Su	ite 2	500				2014 OCT -9
		(Address)			-		<u> </u>	8
Aflar	nta, GA 30						SA,	1
Allai		City, State and Zip Code)			-		第二 第二	
	(City, State and Zip Code)					71	亚
For fu	rther informati	on concerning this ma	atter, p	olease call:			10%G	强 6:35
Card	l H. South	wood	at (404)88 ₍	35-6767	37 	
	(Name of Cont	act Person)		(Area Code	and	Daytime Telephone	Number)	
Enclos	sed is a check	for the following amo	unt:					
✓ \$ 52.5	50 Filing Fee	\$61.25 Filing Fee and Certificate of Status		105.00 Filing Certified Co		\$113.75 Filis Certified Copy Certificate of S	, and	
Regist Division Clifton 2661 F	ET ADDRES ration Section on of Corporat n Building Executive Cent assee, FL 323	tions ter Circle		Regist Division P. O. F	ration on of Box 6	ADDRESS: n Section Corporations 5327 e, FL 32314		

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

Kiersted Systems, L.P.		
(Name of limited partn	ership or limited liability limited partnership)	ES.
Texas		SYN:
(Ju	risdiction of formation)	# <u>~</u>
4/12/2012		
(Date authori	zed to transact business in Florida)	92
•	imited liability limited partnership is no long wishes to cancel its certificate of authority pu	-
This entity appoints the Florida Deprights of action arising out of the tra	partment of State as its agent for service of pronsaction of business in this state.	ocess for
Effective date, if other than the date (Effective date cannot be prior to nor more Department of State.)	of filing: date of filing than 90 days after the date this document is filed by	 the Florida
Signature of a general partner:		
Typed or printed name:		
George Kiersted, President, Kiersted	General Partner, Inc., General Partner	
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75	