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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)205-8842

Fax Number : (850)205-6642

DISS/TERM/CANCEL/REV OF LP/LLP D&T REALTY ASSOCIATES, LLLP

Certificate of Status	0
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## **COVER LETTER**

TO:	Registration Division of	Section Corporations					•
SUBJ		EALTY ASSOCIATES, L		ry Limited Partnership)	<del></del>		
The e	nclosed Notice	e of Cancellation and	fee(s) are submitte	ed for filing.			
Please	return all cor	respondence concerni	ng this matter to:				
CORY	GERBRANDT		•				
		(Contact Person)		•			
ert co	RPORATION S	YSTEMS					
		(Firm/Company)	<del></del>	•			
61.6 F.	CT 0 4 0 17 4 1 77	ANIE					
212 67	ST PARK AVE	(Address)		•			
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TALL.	AHASSEE, PL 3			-		픐	-
		(City, State and Zip Code	)		类型	MUL	ā
					表記	1	Parties.
For fi	uther informs	tion concerning this n	natter, please call:		ch-		
CORY	GERBRANDT		at (150	) 558-1933	ارت سا ارت سا	2	
	(Name of Con	tact Person)	(Area Code	and Daytime Telephone Nu	upet)	ڣ	Livery
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<b>X</b> 552.	50 Filing Fee	S61.25 Filing Fee and Certificate of Status	S105.00 Filing and Certified Co		i		
STREET ADDRESS:		MAIL	ING ADDRESS:				
Registration Section		Regist	ration Section				
Division of Corporations			on of Corporations				
	n Building			30x 6327			
	Executive Co		Tallah	assee, FL 32314			
Talla	hassee, FL 32	301					

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

D&T RE	ALTY ASSOCIATES, LLLP		
(Name of limited partn	ership or limited liability limited partnership)		
	GA		
(Ju	risdiction of formation)		
	01/14/2013		
(Date authori	zed to transact business in Florida)		
	imited liability limited partnership is no longer wishes to cancel its certificate of authority pursuant to		
This entity appoints the Florida Deprights of action arising out of the tra	partment of State as its agent for service of process for insaction of business in this state.		
Effective date, if other than the date (Effective date cannot be prior to nor more Department of State.)	of filing: than 90 days after the date this document is filed by the Florida	2915 JUN -	a series
Signature of a general partner.		-	-
Du 3 Hor	E OF S	A	m
Typed or printed name:  Duage L. Honer	FLONIDA	9: 10	U
Filing Fee:	\$52.50 \$52.50		
Certified Copy (optional): Certificate of Status (optional):	\$8.75		