

B94 0000000245

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

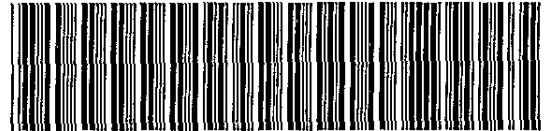
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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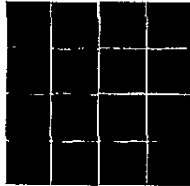
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B94-245

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JB  
11-27-02



LEFMARK

**TRANSMITTAL LETTER**

November 20, 2002

via U.S. mail

Florida Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, Florida 32314

**Re: Dark Starr Limited Partnership  
Certificate of Cancellation  
Document No. B94000000245**

Dear Sirs:

The enclosed Certificate of Cancellation for Dark Starr Limited Partnership and fee of \$52.50 are submitted for filing.

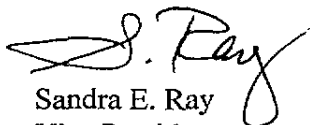
Please return all correspondence concerning this matter to the following:

Sandra E. Ray  
Dark Starr Limited Partnership  
One Greenway Plaza, Suite 850  
Houston, Texas 77046

The undersigned can be reached at telephone 713-850-1850, fax 713-850-7090 and email [sray@lefmark.com](mailto:sray@lefmark.com).

Sincerely,

**Dark Starr Limited Partnership**  
by LEF/Kendall Mall, Ltd., its general partner  
by LEF/Kendall Mall, Inc., its general partner


  
Sandra E. Ray  
Vice President

APPROVAL  
AND  
FILED  
02 NOV 26 AM 9:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE OF CANCELLATION  
FOR  
DARK STARR LIMITED PARTNERSHIP**

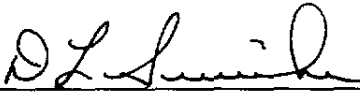
Pursuant to the provisions of section 620.174, Florida Statutes, this foreign limited partnership hereby submits this certificate of cancellation in order to cancel its registration with the Florida Department of State.

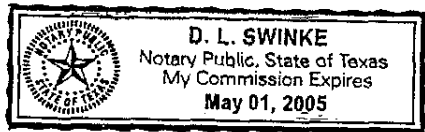
Dark Starr Limited Partnership  
By: LEF/Kendall Mall, Ltd., its general partner  
By: LEF/Kendall Mall, Inc., its general partner

  
Sandra E. Ray, Vice President

State of Texas       §  
                                  §  
County of Harris   §

On this 20<sup>th</sup> day of November, 2002, Sandra E. Ray, Vice President of LEF/Kendall Mall, Inc., the general partner of LEF/Kendall Mall, Ltd., the general partner of Dark Starr Limited Partnership, appeared before the undersigned notary, whose identity is personally known to me.

  
\_\_\_\_\_  
Notary Public  
My Commission Expires: \_\_\_\_\_



APPROVED AND FILED  
02 NOV 26 AM 9:53  
SECRETARY OF STATE  
TALLAHASSEE, FL