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BYRON BEST CAPTEC FRANCHISE P.O. BOX 544 ANN ARBOR, MI 4810 City/State/Zig	p Phone #	SECRETARY OF SIAIL AHASSEE, FLORIDA Office Use Office
CORPORATION NA	AME(S) & DOCUMENT NUMB	ER(S), (if known):
1(Corner	ation Name) (Docu	ment #)
(Corpora	ation radius)	
2. (Corpor	ation Name) (Docu	ment #)
3.		
(Corpor	ation Name) (Docu	900023957492 -01/03/3801077001 ******52.58 *******52.50
4(Corpor	ration Name) (Docu	#*****52.58 ******52.58
		CM
□ Walk in □	Pick up time	Certified Copy
☐ Mail out ☐	Will wait Photocopy	Certificate of Status
NEW FILINGS	AMENDMENTS	
Profit	Amendment	
NonProfit	Resignation of R.A., Officer/Directo	or
Limited Liability	Change of Registered Agent	
Domestication	Dissolution/Withdrawal	
Other	Merger	
- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10		
OTHER FILINGS	REGISTRATION/ QUALIFICATION:	
Annual Report	Foreign	•
Fictitious Name	Limited Partnership	•-

Reinstatement

Trademark

Other

Examiner's Initials

Name Reservation

CERTIFICATE OF CANCELLATION FOR

(insert nar	me currently on file with Florida Dept. of State)
Pursuant to the provisions of sec hereby submits this certificate of Department of State.	tion 620.174, Florida Statutes, this foreign limited partnership cancellation in order to cancel its registration with the Florida
	au Freak
STATE OF MICHIGAN COUNTY OF WASHTENAW	FILE 98 JAN -9 SECRETARY
On this <u>5TH</u> day of <u>JANUARY</u> personally appeared before me,	who is personally known to me whose identity I proved on the basis of
_	
	Byn M Best Notary Public Signature
	BYRON M. BEST Notary's Printed Name
g 1	BYRON M. BEST Notary Public, Wayne County, M.I My Commission Expires May 13, 19
Seal	My Commission Expires: