

1395000000184

Faison

Requester's Name

121 West Trade Street, Suite 2550

Address

Charlotte, NC 28202-5399

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

500003173905--0
-03/17/00--01050--001
210.00 **52.50

4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- Updater ☐ Annual Report
Updater ☐ Fictitious Name
Verifier

Acknowledgement DCC

W. P. Verifier DCC

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
☐ Other

FILED
00 MAR 17 PM 2:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Examiner's Initials

**CERTIFICATE OF CANCELLATION
FOR**

FCD- BOVITA BAY PLAZA LIMITED PARTNERSHIP

(insert name currently on file with Florida Dept. of State)

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.

BY: FAISON CAPITAL DEVELOPMENT, INC., GENERAL PARTNER

BY: [Signature]

(Signature of a General Partner)

Allen S. Jackson, Jr. Vice President

(Typed or Printed name of General Partner Signing Above)

STATE OF North Carolina

COUNTY OF Mecklenburg

On this 16th day of March, 2002,
personally appeared before me,

- ☒ who is personally known to me
☐ whose identity I proved on the basis of _____

Allen S. Jackson

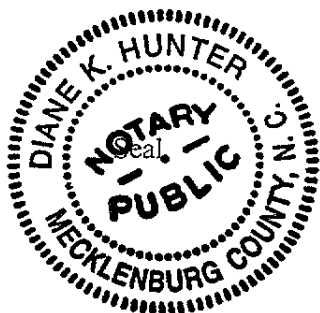
FILED
00 MAR 17 PM 2:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Diane K. Hunter

Notary Public Signature

Diane K. Hunter

Notary's Printed Name



My Commission Expires: 12-10-02