

B95000000245

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

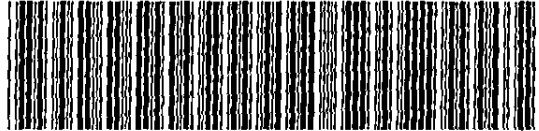
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B95-245

Cancel

Office Use Only



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05/03/05--01011--026 **113.75

FILED
MAY 3 2005
FBI - BOSTON

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: St. Stephen Limited Partnership
(Name of Limited Partnership)

FLORIDA REGISTRATION NUMBER: B95000-000245

The enclosed Certificate of Cancellation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sandra E. Ray

(Name of Person)

LEF/Delray Mall, Ltd., general partner, by LEF/Delray Mall, Inc., general partner

(Firm/Company)

One Greenway Plaza, Suite 850

(Address)

Houston, Texas 77046

(City/State and Zip Code)

For further information concerning this matter, please call:

Sandra E. Ray

(Name of Person)

at (713) 355-4100

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$52.50 Filing Fee

☐ \$61.25 Filing Fee &
Certificate of Status

☐ \$105.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☒ \$113.75 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

**CERTIFICATE OF CANCELLATION
FOR**

St. Stephen 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.

Shonda C. Ray
(Signature of a General Partner)

LEF/Delray Mall, Ltd., general partner by LEF/Delray Mall, Inc.,
(Typed or Printed name of General Partner Signing Above) *its general partner*

STATE OF

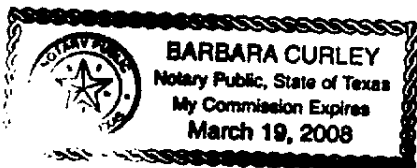
COUNTY OF

On this 28th day of April, 2005,
personally appeared before me,

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

Barbara Curley
Notary Public Signature

Barbara Curley
Notary's Printed Name



Seal

My Commission Expires: 3/18/08