

B916 000000 440

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

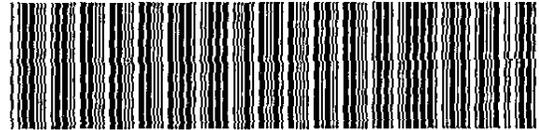
(Business Entity Name)

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FILED
2004 OCT -4 AM 11:52
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN OCT 11 2004

CT CORPORATION

September 28, 2004

RE: TRIAD BRANDON LIMITED PARTNERSHIP (WA. DOM.)

FILED
2004 OCT -4 AM 11:52
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Secretary of State
Corporate Records Bureau
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for each of the above corporations. Also enclosed is 1 checks in the amount of \$87.50 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri (hm)

Theresa Alfieri
Senior Supervisor &
Assistant Secretary

TA/hm
Enclosure

111 Eighth Avenue
New York, NY 10011
Tel. 212 894 8940
Fax 212 590 9180

RESIGNATION OF REGISTERED AGENT FOR A LIMITED PARTNERSHIP

FILED
2004 OCT -4 AM 11:52
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 620.1051(2), Florida Statutes, the undersigned,

C T CORPORATION SYSTEM, hereby resigns as Registered
(Name of Registered Agent)

Agent for TRIAD BRANDON LIMITED PARTNERSHIP (WA. DOM.) (B96000000440)

(Name of Limited Partnership)

A copy of this resignation was mailed to the above listed partnership at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

C T CORPORATION SYSTEM

(Signature)
THERESA ALFIERI
ASSISTANT SECRETARY

**Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314**

FILING FEE: \$ 87.50

INHS16(9/98)