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SECH-TALLANIASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Hawksridge Multifamily Limited Partnership (Name of Limited Partnership)
FLORIDA REGISTRATION NUMBER: <u>B97000000185</u>
The enclosed Certificate of Cancellation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Philip L. Carson (Name of Person)
Carson Boxberger LLP
(And Company)
1400 One Summit Square
(Address)
Fort Wayne, Indiana 46802
Fort Wayne, Indiana 46802 (City/State and Zip Code) For further information concerning this matter, please call:
For further information concerning this matter, please call:
Philip L. Carson at (260) 423-9411 (Arrea Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$52.50 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) 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

	mily Limited Partnership me currently on file with Florida Dept. of State)
	on 620.174, Florida Statutes, this foreign limited partnership hereby tion in order to cancel its registration with the Florida Department of (Signature of a General Partner) Marvin L. Bok. President of Amatumn Development, Inc (Typed or Printed name of General Partner Signing Above)
STATE OF INDIANA	
COUNTY OF ALLEN	
who is personall	vin L. Bok, President of Amatumn Development, Inc.
	Notary's Fillited Name
Seal	My Commission Expires: 04/23/08