

B97000000312

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

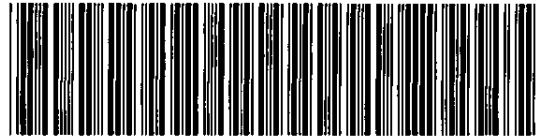
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600193958586

600193958586
02/03/11--01041--001 **25.00

02/21/11--01006--002 **27.50

FILED
2011 FEB 18 AM 9:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

FEB 21 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 4, 2011

GUILLIANO ARMSTRONG
10654 SUNSET POINT LANE
FISHERS, IN 46037

SUBJECT: GUARANTEE PROPERTIES LIMITED PARTNERSHIP
Ref. Number: B97000000312

We have received your document for GUARANTEE PROPERTIES LIMITED PARTNERSHIP and check(s) totaling \$25.00 of which \$25.00 has been designated to file this document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is an additional amount of \$27.50 due. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The form you submitted is for a general partnership, but your entity is a limited partnership. Please complete and return the enclosed blank form(s).

If you have any further questions concerning your document, please call (850) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 811A00003088

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GUARANTEE PROPERTIES LIMITED PARTNERSHIP
(Name of Foreign Limited Partnership or Limited Liability Limited Partnership)

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

Please return all correspondence concerning this matter to:

G. WILLIAM ARMSTRONG

(Contact Person)

GUARANTEE PROPERTIES LIMITED PARTNERSHIP

(Firm/Company)

10654 SUNSET POINT LANE

(Address)

FISHERS IN 46037

(City, State and Zip Code)

For further information concerning this matter, please call:

G WILLIAM ARMSTRONG

(Name of Contact Person)

at (317) 258-1166

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount: 27⁵⁰ per attached letter

\$52.50 Filing Fee

\$61.25 Filing Fee
and Certificate of
Status

\$105.00 Filing Fee
and Certified Copy

\$113.75 Filing Fee,
Certified Copy, and
Certificate of Status

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

FILED

2011 FEB 18 AM 8:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**NOTICE OF CANCELLATION
FOR
FOREIGN LIMITED PARTNERSHIP
OR
LIMITED LIABILITY LIMITED PARTNERSHIP**

GUARANTEE PROPERTIES LIMITED PARTNERSHIP

(Name of limited partnership or limited liability limited partnership)

INDIANA

(Jurisdiction of formation)

B97000000312

6/18/1997

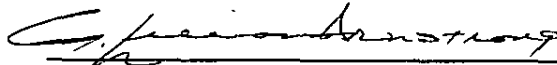
(Date authorized to transact business in Florida)

This foreign limited partnership or limited liability limited partnership is no longer transacting business in Florida and wishes to cancel its certificate of authority pursuant to s. 620.1907, F.S.

This entity appoints the Florida Department of State as its agent for service of process for rights of action arising out of the transaction of business in this state.

Effective date, if other than the date of filing: JANUARY 28, 2011
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Signature of a general partner:



Typed or printed name:

G. WILLIAM ARMSTRONG

Filing Fee: \$52.50
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75