

# B98000000019

CAPITOL SERVICES d/b/a  
PARALEGAL & ATTORNEY SERVICE BUREAU, INC.

(Requestor's Name)  
1406 Hays Street, Suite 2  
(Address)  
Tallahassee, FL 32301 (904) 656-3992  
(City, State, Zip) (Phone #)

OFFICE USE ONLY

300003424023--1  
-10/13/00--01032--012  
\*\*\*\*\*52.50 \*\*\*\*\*52.50

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

1. TST Gateway Center Limited Partnership B98-19  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

Walk in     Pick up time 10/13     Certified Copy  
 Mail out     Will wait     *Stamped* Photocopy     Certificate of State

RECEIVED  
 00 OCT 13 AM 10:59  
 FILED  
 00 OCT 13 AM 11:47  
 DIVISION OF CORPORATIONS  
 TALLAHASSEE, FLORIDA  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input checked="" type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input checked="" type="checkbox"/>	Foreign
<input checked="" type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

*hpc*  
*10/13*

Examiner's Initials

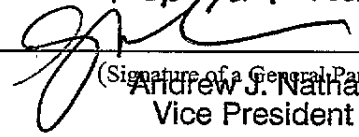
CERTIFICATE OF CANCELLATION  
FOR

TST Gateway Center 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.

*TST Gateway Center Limited Partnership*  
By: *Tishman Speyer / Travelers Associates, its gp*

  
(Signature of a General Partner)  
Andrew J. Nathan  
Vice President

(Typed or Printed name of General Partner Signing Above)

STATE OF New York

COUNTY OF New York

On this 2<sup>nd</sup> day of October, 2000, ANDREW J. NATHAN  
personally appeared before me;

- who is personally known to me
- whose identity I proved on the basis of \_\_\_\_\_

FILED  
OCT 13 AM 11:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

  
Notary Public Signature

Kerri A. Garrett  
Notary's Printed Name

**KERRI A. GARRETT**  
Notary Public, State of New York  
No. 01GA6022001  
Qualified in Queens County  
Certificate Filed in New York County  
Commission Expires March 22, 2001

Seal

My Commission Expires: \_\_\_\_\_