00000514

(Rec	questor's Name)	
(Add	iress)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

Office Use Only



900374879249

2021 OCI 28 PH 2: 25 RECEIVED



FILE FIFST Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 10/28/2021 **WALK IN**					
ENTITY NAME VINING	G-SPARKS IBG, LIMITED PARTNERSHIP				
DOCUMENT NUMBER					
	PLEASE FILE THE ATTACHED AND RETURN				
<u>xxxxxxx</u>	Plain Copy Certified Copy				
	Certificate of Status				
,	*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**				
	Certified Copy of Arts & Amendments				
	Certified Copy of Arts & Amendments Complete File (Including Annual Reports)				
	Certificate of Status Certificate of Status Reflecting:				
	APOSTILLE' / NOTARIAL CERTIFICATION				
COUNTRY OF DESTINA NUMBER OF CERTIFICA					
TOTAL OWED \$ 52.50	ACCOUNT # 120160000072 4: 1				
Please call Tina at t	he above number for any issues or concerns. Thank you so much!				

COVER LETTER

то:	Registration : Division of C				
SUBJ	ECT. VINING	-SPARKS IBG, LIMITED	PARTNERSHIP		
3010		oreign Limited Partnershi	ip or Limited Liabilit	ty Limited F	Partnership)
The er	nclosed Notice	of Cancellation and fo	ee(s) are submitte	ed for filin	ıg.
Please	return all corr	espondence concerning	ng this matter to:		
MARY	' ANN JACKSON	٧ 		_	
		(Contact Person)			
BAKE	R DONELSON		, , ,	-	
		(Firm/Company)			
165 M	ADISON AVE., S	, <u></u>		_	
		(Address)			
MEMP	PHIS, TN 38103				
	(City, State and Zip Code)		•	
For fu	rther informati	on concerning this ma	atter, please call:		
	' ANN JACKSON	_	•	577-8113	
	(Name of Conta		ar (_/	ne Telephone Number)
Enclos	•	for the following amou	ınt	-	·
	sou is a circuit	or the following amov			
\$52	.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	S105.00 Filing and Certified		\$113.75 Filing Fee, Certified Copy, and Certificate of Status
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

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

(Name of foreign limited)	partnership or limited liabilit	y limited partnership)
B98000000514	surmorship or minica naomi	,
(Florida Docum	ent Number of the Foreign L	P or LLLP)
TENNESSEE		
(J	urisdiction of formation)	*****
AUGUST 17, 1998		
(Date author	ized to transact business in I	Plorida)
This foreign limited partnership or transacting business in Florida and s. 620.1907, F.S.	limited liability limited wishes to cancel its cert	partnership is no longer ificate of authority pursuant to
This entity appoints the Florida Deprights of action arising out of the tra		
Effective date, if other than the date (Effective date cannot be prior to nor more Department of State.)	e of filing: e than 90 days after the date	this document is filed by the Florida
NOTE: If the date inserted in this requirements, this date will not be I Department of State's records.	block does not meet the isted as the document's	applicable statutory filing effective date on the
Signature of a general partner.		€* 5 0
		9021 (9A.E
Typed or printed name:		2021 OCT 28 SECRETY::/
Martin F. Shea, Jr., EVP of General Partn	er	28
131. E	#52.50	
Filing Fee: Certified Copy (optional):	\$52.50 \$52.50	. ₩ - 👙 - ∯ - Ø
Certificate of Status (optional):	\$8.75	n 7