

12/28/2017

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 2017-12-28 16:41:47 CFTLP  
 12/28/2017 16:41:47 From: Kimberly Laughrey  
 Division of Corporations

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

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 Account Number : FCA000000023  
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DISS/TERM/CANCEL/RE/ OF LP/LLP  
 KEY HOSPITALITY & HEALTHCARE LIMITED PARTNERSHIP

Certificate of Status	0
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Page Count	03
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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** KEY HOSPITALITY & HEALTHCARE 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:

Tom Baxter  
(Contact Person)

Friday, Eldredge & Clark, LLP  
(Firm/Company)

400 W. Capitol Avenue Suite 2000  
(Address)

Little Rock, Arkansas 72201  
(City, State and Zip Code)

For further information concerning this matter, please call:

Tom Baxter at ( 501 ) 375-1599  
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$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

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

KEY HOSPITALITY & HEALTHCARE LIMITED PARTNERSHIP

(Name of foreign limited partnership or limited liability limited partnership)

B99000000138

(Florida Document Number of the Foreign LP or LLLP)

ARKANSAS

(Jurisdiction of formation)

March 19, 1999

(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.

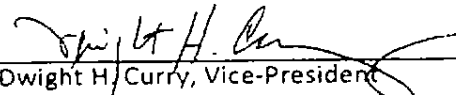
This entity appoints the Florida Department of State as its agent for service of process for rights of action arising out of the transaction of business in this state.

Effective date, if other than the date of filing: \_\_\_\_\_

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

**NOTE:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signature of a general partner:

  
Dwight H. Curry, Vice-President

Typed or printed name:

DDL Corporation, Inc.

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

17 DEC 29 AM 7:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA