FILING FEE: \$50.00

PRINT CLEARLY

CANCELLATION OF CERTIFICATE OF OKLAHOMA LIMITED PARTNERSHIP

TO: OKLAHOMA SECRETARY OF STATE 2300 N Lincoln Blvd., Room 101, State Capitol Building Oklahoma City, Oklahoma 73105-4897 (405) 521-3912

The undersigned, for the purpose of canceling the certificate of limited partnership of an Oklahoma limited partnership pursuant to the provisions of 54 O.S, Section 311, do hereby execute and file the following Certificate of Cancellation:

The name of the limite	d partnership is:		
The date of filing of th	e original certificate of limited partnersh	nip	
The name of the regist	ered agent and the address of the regist	ered office in the State of	Oklahoma is:
Name	Street Address (P.O. Boxes are NOT accept	City able.)	Zip Code
The reason for filing the	ne certificate of cancellation:		
The effective date, whi	ich shall be a date certain, of cancellatio	on if it is not to be effective	e upon filing of
	The date of filing of the The name of the register. Name The reason for filing the The reflective date, who	Name Street Address (P.O. Boxes are NOT accept The reason for filing the certificate of cancellation: The effective date, which shall be a date certain, of cancellation	The date of filing of the original certificate of limited partnership The name of the registered agent and the address of the registered office in the State of Name Street Address (P.O. Boxes are NOT acceptable.) The reason for filing the certificate of cancellation: The effective date, which shall be a date certain, of cancellation if it is not to be effective.

Signed and dated this		_ GENERAL PARTNERS		
Signature (List title if applicable)	(List title if appl	Signature (List title if applicable	
Print or Type Name		Pri	Print or Type Name	
Business Address		E	Business Address	
City State Zip Co	ode	City	State	Zip Code
NOTE : A Certificate of Cancellation behalf of a corporation shall be sign sealed. (54 O.S., Section 312.A.3)	ned by the president o			

6.

Other information, if any: