FORM PTO-1618A Expires 06/30/99 OMB 0651-0027

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Name	Dimensions, Inc.				
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NORTH CAROLINA

Department of The Secretary of State

To all whom these presents shall come, Greetings:

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify the following and hereto attached to be a true copy of

CANCELLATION OF CERTIFICATE OF DOMESTIC LIMITED PARTNERSHIP

OF

DNZ LIMITED PARTNERSHIP

the original of which was filed in this office on the 7th day of December, 2000.



Document ld: 203429015

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 7th day of December, 2000

Claime J. Marshall
Secretary of State

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State of North Carolina Department of the Secretary of State

SOSID: 0970312
Date Filed: 12/7/2000 11:07 AM
Elaine F. Marshall
North Carolina Secretary of State

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☐ B. DOMESTIC LIMITED PARTNERSHIP CANCELLATI	on	No. of pages attached:
1.Name of limited partnership: DNZ Limited Partnership		
2.Date originally filed with Secretary of State: 3/24/97 3	3. Number originally assigned by Secretary of State: 097031	2
4.Reason for cancellation: The limited partner had and withdrawn, and the limited part to terminate the partnership. 5.Effective date of cancellation (not to exceed 90 days from this filing	tner and the general partner have	al partner agreed
	by Secretary of State): Up of TIIIng	
6.Any other information partners wish to present:		
7. The following signatures by each general partner constitute an affirm	nation under the penalties of perjury that the facts herein are true.	
Complete for each general partner.	Signature	Date
I. Name Dimensions, Inc. TitleBy: Ronald V. Budnick, Vice	- K.V. Sufrish	11/28/00
2. Name Presiden	t /	
Title		
3. Name		
Title		
C. FOREIGN LIMITED PARTNERSHIP CANCELLATION	NO	No. of pages attached:
1.Name of limited partnership:		
2. Name used to transact business in N.C., if different:		
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