

5/5/2020

A 98000002044

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H20000132786 3))



H200001327863ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : LAW OFFICE OF NATHAN L. TOWNSEND, PA
Account Number : I20050000145
Phone : (813)988-5500
Fax Number : (813)988-5510

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2020 MAY -5 AM 9:00

FILED

RECEIVED

2020 MAY -5 PM 4:00

DISS/TERM/CANCEL/REV OF LP/LLP
ABDULHUSSEIN FAMILY LIMITED PARTNERSHIP

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$113.75

Electronic Filing Menu

Corporate Filing Menu

Help

Y SUJ KER

MAY 06 2020

((H20000132786 3)))

**CERTIFICATE OF DISSOLUTION FOR
ABDULHUSSEIN FAMILY LIMITED PARTNERSHIP**

Under the provisions of F.S. 620.1203, this Florida limited partnership, whose certificate was filed with the Florida Department of State on September 1, 1998, hereby submits this certificate of dissolution.

FIRST: Reason for dissolution: Agreement between the partners to unwind the entity as it no longer is required for its original purposes.

SECOND: A Notice of Dissolution is attached.

THIRD: This certificate of dissolution shall be effective at the time of its filing with the Florida Department of State.

Signatures of all general partners:


Mohamed Abdul Hussein

FILED
2020 MAY -5 AM 9:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

((H20000132786 3)))

((H20000132786 3))

**NOTICE OF DISSOLUTION
FOR
ABDULHUSSEIN FAMILY LIMITED PARTNERSHIP**

This notice is submitted by the dissolved limited partnership for resolution of payment of unknown claims against this limited partnership as provided in F.S. 620.1807.

This "Notice of Dissolution" is optional and is not required when filing a Certificate of Dissolution.

Name of Dissolved Limited Partnership: ABDULHUSSEIN FAMILY LIMITED PARTNERSHIP

Description of information that must be included in a claim:


The date of such claim, the amount and the basis of such claim.

Mailing address where claims can be sent:

Nathan L. Townsend, PA., 1000 Legion Place., Ste. 1200, Orlando, FL 32801

A claim against the above named limited partnership will be barred unless a proceeding to enforce the claim is commenced within four (4) years after the filing of the notice.

Signature of a general partner:



Mohamed Abdul Hussein

((H20000132786 3))