

A010000000010

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

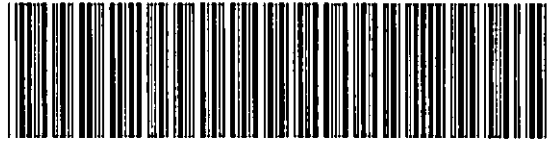
Special Instructions to Filing Officer:

Q. SILAS

MAY 2022

5/24/22

Office Use Only



200384498622

04/04/22--01027--007 \*\*195.00

FILED  
MAY 24 PM 12:11  
SECRETARY OF STATE  
TALLAHASSEE, FL



RECEIVED

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

2022 MAY 24 PM 12:42

SECRETARY OF STATE  
TALLAHASSEE, FL

May 6, 2022

JOHN MALIK  
1745 US HIGHWAY 441  
LEESBURG, FL 34748

SUBJECT: MALIK FAMILY LIMITED PARTNERSHIP, LLLP  
Ref. Number: A01000000010

We have received your document and check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must be signed by all of the general partners or the person appointed pursuant to s. 620.1803(3) or (4), Florida Statutes, to wind up the partnership's affairs.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Silas  
Regulatory Specialist II

Letter Number: 722A00010516

**COVER LETTER**

**TO:** Registration Section

Division of Corporations

**SUBJECT:** MALIK FAMILY LIMITED PARTNERSHIP, LLP  
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Dissolution and fee(s) are submitted for filing.  
Please return all correspondence concerning this matter to:

JOHN MALIK

(Contact Person)

GATOR HARLEY-DAVIDSON

(Firm/Company)

1745 US HIGHWAY 441

(Address)

LEESBURG, FL 34748

(City, State and Zip Code)

For further information concerning this matter, please call:

JANICE MALIK

(Name of Contact Person)

at ( 321 ) 258-1429

(Area Code)

(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

CERTIFICATE OF DISSOLUTION  
FOR

FILED

MALIK FAMILY LIMITED PARTNERSHIP, L.L.P.

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

2022 MAY 24 PM 12:17

SECRETARY OF STATE  
TALLAHASSEE, FL

Pursuant to the provisions of section 620.1203, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on 01/03/2001, assigned Florida document number AD1000000010, hereby submits this Certificate of Dissolution.

**FIRST:** Reason for dissolution: (State why partnership is submitting dissolution)

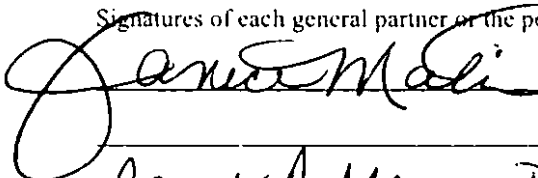
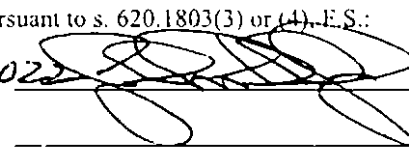
ESTABLISHED FOR A BUILDING AND BUSINESS THAT  
HAS NOW BEEN CLOSED AND SOLD IN 2021.  
THEREFORE, THE PARTNERSHIP NO LONGER NEEDED.

**SECOND:** ☐ A Notice of Dissolution is attached.  
(Check box if attached.)

**THIRD:** Effective date, if other than the date of filing: MARCH 31, 2022  
(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.

Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:

 3/30/2022   
ARLENE A. MALIK - DECEASED  
DEATH CERTIFICATE ATTACHED

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