

Handwritten: A01 00000000 72

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

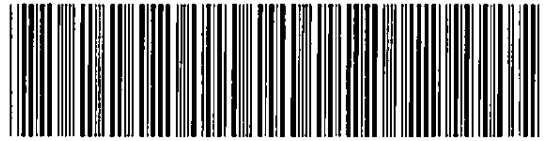
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: PICKLE FAMILY LTD.

(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:

Linda M. Malone

(Contact Person)

Howard Stallings Law Firm

(Firm/Company)

2918 Trent Road

(Address)

New Bern, NC 28562

(City, State and Zip Code)

For further information concerning this matter, please call:

Linda Malone

252

633-3006

at ()

(Name of Contact Person)

(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**

PICKLE FAMILY LTD.

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

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 January 12, 2001, assigned Florida document number A01000000072, hereby submits this Certificate of Dissolution.

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

The Partners in the Partnership have unanimously signed a written consent determining that the Partnership should be dissolved. This qualifies as an event of dissolution under the Partnership Agreement.

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

THIRD: 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.

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

Kathleen P. Eller
Kenneth B. Pickle
Keith Pickle

Kathleen Eller, Trustee of Kathleen P. Eller Rev. Tr. 1017103
Kenneth B. Pickle
Keith Pickle, Trustee of Keith A. Pickle Rev. Tr. 1126195

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

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SECRETARY OF STATE
TALLAHASSEE, FL

FILED

**NOTICE OF DISSOLUTION
FOR
FLORIDA LIMITED PARTNERSHIP
OR LIMITED LIABILITY LIMITED PARTNERSHIP**

This notice is submitted by the dissolved limited partnership or limited liability limited partnership named below or the successor entity for resolution of payment of unknown claims against this limited partnership or limited liability limited partnership as provided in s. 620.1807, F.S.

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

Name of Dissolved Limited Partnership or Limited Liability Limited Partnership:
PICKLE FAMILY LTD.

Description of information that must be included in a claim:

All Claims must state: the name and address of the Claimant, a phone number at which the Claimant may
be reached, the amount of the Claim, and additional materials describing the nature of the Claim and the
supporting the basis of the Claim.

Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.)

516 Lakeway Drive

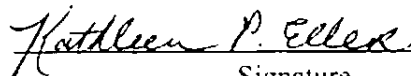
Saint Augustine, FL 32080

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

Signature of a general partner or a principal of the successor entity:

Kathleen P. Eller

Printed Name



Signature

Fee: No charge if included with Certificate of Dissolution. If filed separately, \$52.50.