

AD8000 000 119

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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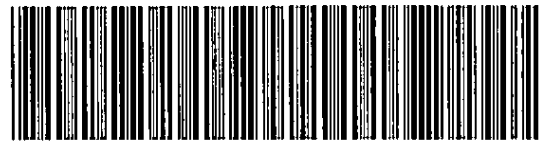
(Business Entity Name)

(Document Number)

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

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DIVISION OF CORPORATIONS  
19 NOV 18 AM 9:25

*Dissolution w/notice*

DEC 18 2019

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** A. L. Hillegass Family Partners, LLLP  
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

David C. Gilmore, Esq.  
(Contact Person)

David C. Gilmore, Esq.  
(Firm/Company)

11169 Trinity Blvd.  
(Address)

Trinity, FL 34655  
(City, State and Zip Code)

For further information concerning this matter, please call:

David C. Gilmore, Esq. at (727) 849-2296  
(Name of Contact Person) (Area Code and 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

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DIVISION OF CORPORATIONS  
19 NOV 18 AM 9:25

**CERTIFICATE OF DISSOLUTION  
FOR**

A. L. Hillegass Family Partners, L.L.P.

(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 February 4, 2008, assigned Florida document number A08000000119, hereby submits this Certificate of Dissolution.

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

The purposes for which the Limited Liability Limited Partnership were established have been satisfied.

The General Partner believes it is in the best interests of the Partnership that it be dissolved.

**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.:

E. L. Hillegass

President

Hillegass Holdings, Inc.

Gen Partner

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

19 NOV 18 AM 9:25

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

**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:  
A. L. Hillegass Family Limited Partners, LLLP

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Description of information that must be included in a claim:

Name of Claimant

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Address of Claimant

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Date of Claim

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

David C. Gilmore, Esq.

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11169 Trinity Blvd.

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Trinity, Florida 34655

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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:

Elizabeth A. Hillegass  
Printed Name

Elizabeth A. Hillegass, President  
Signature

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