

A11000000192

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

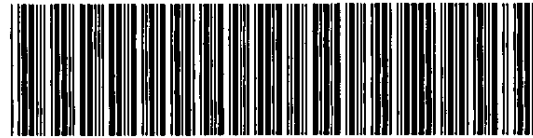
(Document Number)

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

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TALLAHASSEE, FLORIDA

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JUN 07 2017

# STEVEN J. ASARCH, P.A.

Law Offices

**Steven J. Asarch, J.D., LL.M.\***

*Board Certified Wills, Trusts and Estates Lawyer*

\*admitted in FL and NY

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June 1, 2017

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**RE: MOLAN FAMILY LIMITED PARTNERSHIP**

Dear Sir or Madam:

Please find enclosed an executed Certificate of Dissolution for filing on behalf of our client, **MOLAN FAMILY LIMITED PARTNERSHIP**, along with our firm's check in the amount of \$61.25 which includes the following fees:

Filing Certificate of Dissolution	\$ 52.50
Certificate of Status	<u>8.75</u>
<b>TOTAL FEES</b>	<b>\$ 61.25</b>

Please return all correspondence concerning this matter to the undersigned at the address listed above.

Thank you for your attention to this matter. If you have any questions regarding the above, please contact my office.

Sincerely,



Steven J. Asarch  
Attorney at Law

SJA/

Enclosures

cc: Herbert D. Molan w/out Encl.

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

Pursuant to the provisions of section 620.1203 of the Florida Statutes, this Florida limited partnership, whose certificate was filed with the Florida Department of State on March 11, 2011, assigned document number A11000000192, hereby submits this Certificate of Dissolution.

1. The reasons for dissolution is that the partnership has liquidated all of its assets and liabilities and the sole general partner and all of the limited partners have consented to the dissolution of the limited partnership.

2. A Notice of Dissolution is attached.

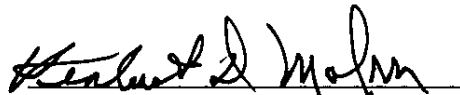
3. The effective date shall be the date of filing this Certificate.

The undersigned, the sole general partner, has executed this Certificate of Dissolution this 31<sup>st</sup> day of May 2017.

GENERAL PARTNER:

MOLAN FAMILY ENTERPRISES, INC.

By:

  
Herbert D. Molan, President

17 JUN - 10:31 PM '17

**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:

Molan Family Limited Partnership

Description of information that must be included in a claim:

Nature and amount of claim.

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

Herbert D. Molan

17311 Bridleway Trail

Boca Raton, FL 33496

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:

Herbert D. Molan  
Printed Name

  
Signature

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