

A12000 CCC145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

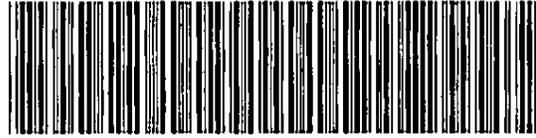
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/03/21--01003--005 **61.25

2021 APR 30 AM 11:28

J SIMMONS
JUN 21 2021

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April 22, 2021

CERTIFIED MAIL, RETURN RECEIPT

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

RE: Bilik Family Limited Partnership

Dear Sir/Madam:

Enclosed please find our Cover Letter as well as a signed Certificate of Dissolution for the Bilik Family Limited Partnership.

I have also enclosed a check in the amount of \$61.25 in payment of the filing fee and a Certificate of Status. Please send the Certificate of Status when issued to the undersigned. I have enclosed a self-addressed stamped envelope for this purpose.

If you have any questions, please do not hesitate to let me know. Thank you.

Very truly yours,



Robert M. Brimacombe

RMB/lse
Enclosure

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COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: Bilik Family Limited Partnership

(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:
Robert M. Brimacombe

(Contact Person)

Conlin, McKenney & Philbrick, P.C.

(Firm/Company)

350 S. Main St., Ste. 400

(Address)

Ann Arbor, Michigan 48104

(City, State and Zip Code)

For further information concerning this matter, please call:

Robert M. Brimacombe at (734) 997-2152

(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**

Bilik Family Limited Partnership

2012 APR 30 AM 11:28

(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 March 16, 2012, assigned Florida document number A12000000145, hereby submits this Certificate of Dissolution.

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

The partners have determined that there is no longer any need for the partnership, there are no creditors,

and all assets of the partnership have been distributed in kind to the partners in proportion to their

respective percentage interests in the partnership.

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

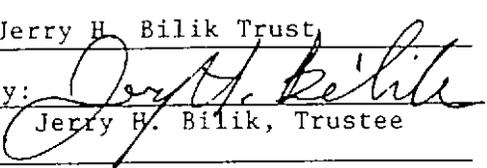
THIRD: Effective date, if other than the date of filing: _____
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

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.:

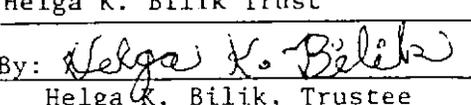
Jerry H. Bilik Trust

By:


Jerry H. Bilik, Trustee

Helga K. Bilik Trust

By:


Helga K. Bilik, Trustee

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