

A 120000000945

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

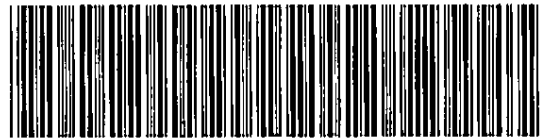
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

Special Instructions to Filing Officer:  
  
  
  
  
  
  
  
  
  
**EFFECTIVE DATE**  
9/30

Office Use Only



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SEP 14 2020

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FILED  
2020 SEP 14 PM 6:41  
TENNIS  
FILING OFFICE  
MEMPHIS  
TN 38103

OCT 23 2020

S. YOUNG

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** THE JOHN V.R. KING 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:  
ELAN R. KANEY, ESQ.

\_\_\_\_\_  
(Contact Person)

KANEYLAW  
\_\_\_\_\_  
(Firm/Company)

444 SEABREEZE BLVD., SUITE 910A  
\_\_\_\_\_  
(Address)

DAYTONA BEACH, FL 32118  
\_\_\_\_\_  
(City, State and Zip Code)

For further information concerning this matter, please call:

ELAN R. KANEY at ( 386 ) 281-5777  
\_\_\_\_\_  
(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

**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:  
THE JOHN V.R. KING LIMITED PARTNERSHIP

Description of information that must be included in a claim:

A brief description of the nature of the claim, the amount of the claim, and the date the claim was incurred.

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

Elan R. Kaney, Esq.

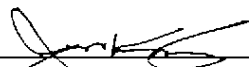
444 Seabreeze Blvd., Suite 910A, Daytona Beach, FL 32118

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:

John V.R. King

Printed Name

  
Signature

2020 SEP 14 PM 6:41  
STATE OF FLORIDA  
DEPARTMENT OF STATE  
RECORDS MANAGEMENT

FILED

**CERTIFICATE OF DISSOLUTION  
FOR**

THE JOHN V.R. KING LIMITED PARTNERSHIP

\_\_\_\_\_  
(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 12/21/2012, assigned Florida document number A12000000945, hereby submits this Certificate of Dissolution.

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

Conclusion of business purpose.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

**THIRD:** Effective date, if other than the date of filing: September 30, 2020  
(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.:

 \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

2020 SEP 14 PM 6  
STATE OF FLORIDA  
DEPARTMENT OF STATE

**FILED**