

A15 000000754

(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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MAY 28 2019

FILED  
2019 MAY 13 AM 11:30  
SECRETARY OF STATE  
TALLAHASSEE, FL

Alert. of  
V/Diss. w/  
notice

## COVER LETTER

**TO:** Registration Section

Division of Corporations

**SUBJECT:** PT Services, L.P.

(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:  
Angela Lack Kopchak

(Contact Person)

Angela J. Lack, P.L.L.C.

(Firm/Company)

P.O. Box 285

(Address)

Bath, PA 18014

(City, State and Zip Code)

For further information concerning this matter, please call:

Angela Lack Kopchak

at ( 727 ) 224-8950

(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**

PT Services, LP,

(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 May 8, 2019 11/25/2015, assigned Florida document number A15000000754, hereby submits this Certificate of Dissolution.

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

Partnership is no longer in business.

**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.:

Brian A. Lach

as managing member of PT

Services, GP, LLC general partner

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

2019 MAY 13 AM 11:30  
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:  
PT Services, LP

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Description of information that must be included in a claim:

Documentation relating to the claim, amount due, date limited partnership incurred the debt, and any

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additional information necessary to evaluate the claim.

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

PT Services, LP, c/o Angela Lack Kopchak, Esquire, P.O. Box 285, Bath, PA 18014

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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:

Bruce A. Lack, as Managing Member of PT

Printed Name *Services GP, LLC,  
general partner*

Signature

*Bruce A. Lack, as managing  
member of PT Services  
GP, LLC, general partner*

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