

L04000024671

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

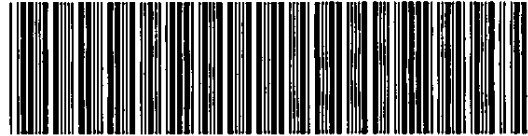
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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11/03/15--01010--012 **55.00

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2015 NOV -3 PM 12:52
SECRETARY OF STATE
TALLAHASSEE FLORIDA

NOV 04 2015
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NECC of Florida, LLC
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Walter Sockoloskie

(Name of Person)

Roch Capital Inc.

(Firm/Company)

50 Applied Card Way

(Address)

Glen Mills, PA 19342

(City/State and Zip Code)

For further information concerning this matter, please call:

Walter Sockoloskie

(Name of Person)

at (484) 840-9179 ext. 29536
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee and Certificate of Dissolution

☒ \$55.00 Filing Fee, Certificate of Dissolution &
Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
NECC of Florida, LLC

2. The Articles of Organization were filed on 03/31/2004 and assigned
document number L04000024671

3. The delayed effective date the dissolution if not effective on the date of filing: 09/30/2015
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
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.

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
Upon Written Consent of the Members of NECC of Florida, LLC dated September 30, 2015.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: _____

6. Signature of an authorized person or if there are no members, the signature of the person appointed and
listed above to wind up the company's activities and affairs:



Signature

Peter G. Abessinio
Printed Name

FILING FEE: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: NECC of Florida, LLC

Document number of Limited Liability Company is: L04000024671

Date of dissolution was: 09/30/2015

Description of information that must be included in a written claim:

Name of Claimant

Date of Sale

Amount of Sale

Product / Service Provided

Contact individual / number

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Office of the President

5401 Broken Sound Boulevard NW

Boca Raton, FL 33487

SECRETARY OF STATE
ALLAHASSI FLORIDA

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A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Peter G. Abessinio

Printed Name of the Person Filing



Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00