10000120311

(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



600312767486

05/04/18--01026--003 **50.00

MAY 08 2018

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: NCT-111, LLC	
	of Limited Liability Company
Dear Sir or Madam:	
The enclosed Statement of Termination and	fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to the following:
c/o Theodore E. Day, Jr.	
Name of Person	
NCF Corporation	
Firm/Company	
707 N. Franklin Street, Ste 800	
Address	
Tampa, FL 33602	
City/State and Zip Code	
tday@ncfgiving.com	
E-mail address: (to be used for future annua	d report notification)
For further information concerning this matter	er, please call:
Theodore E. Day, Jr.	at (404) 252-0100
Name of Person	Area Code Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations	MAILING ADDRESS: Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314

CR2E141 (2/14)

Tallahassee, Florida 32301

STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Sta FIRST: The name of the limited liability co		nent of Termination:
SECOND: The Florida Document number	of the limited liability company is:)0120311
THIRD: The date of filing of the initial art	icles of organization is: December 18, 2	006
FOURTH: The date of filing of the dissolu	ution is: <u>April 24, 2018</u>	
FIFTH: This limited liability company has that it will file a statement of termination.	s completed winding up its activities and a	ffairs and has determined
16/1	Mytrinh McGrath	-
Signature of Authorized Representative	Typed or printed name of signature	
Cert	Filing Fee: \$25.00	18 MAY - L RE MA