## 208000107365

(Re	equestor's Name)	
(Ad	idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Ві	ısiness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





000270852400

000270852400 04/03/15--01009--023 \*\*30.00

SECRETARY OF STATE
SECRETARY OF STATE

1'4Y 1 4 2015 T. HAMPTON

## **COVER LETTER**

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Divisi	ion of Corporations	
SUBJECT:	NoemRe	F LLC ed Liability Company)
<del></del>	(Name of Limit	ed Liability Company)
The enclosed A	Articles of Dissolution and fee(s) are submitt	ed for filing.
Please return a	Il correspondence concerning this matter to	the following:
	<u>Hichael W</u>	einstein
	(Nan	ne of Person)
	Aug m Q	w 7 / C
	(Fire	2¥ UC (m/Company)
	362 GARDENS PAR	Kuay Apt. 603-B.
	PAIM Beach	Address)  Address)  Gardens, FL 33410  te and Zip Code)
	(Chysta	te and Zip Code)
For further info	ormation concerning this matter, please call:	
5	uzanne WeinsTein	at ( <u>239</u> ) <u>370-4999</u> (Area Code & Daytime Telephone Number)
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a che	eck 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:	STREET/COURIER ADDRESS:
	Registration Section	Registration Section
	Division of Corporations	Division of Corporations

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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 22, 2015

MICHAEL E. WEINSTEIN NORMEX LLC 3620 GARDENS PARKWAY APARTMENT B-603 PALM BEACH GARDENS, FL 33410 US

SUBJECT: NORMREX, LLC Ref. Number: L08000107365

We have received your document for NORMREX, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity name and document number must be included on the Articles of Dissolution Application.

A brief description of the occurrence that resulted in the company's dissolution must be included in your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina D Cannon Regulatory Specialist II

Letter Number: 715A00008113

www.sunbiz.org

Division of Cornerations DO ROY 6207 Tellahasses Florida 20214

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is  Noknkey LLC
2.	The Articles of Organization were filed on and assigned and assigned
	document number <u>L 6800 0 10 7 365</u>
3.	The delayed effective date the dissolution if not effective on the date of filing: (effective date cannot be prior to or more than 90 days later than date document is received for filing)
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).
	Michael Weinstein has lost must of his exestly
	in one eye and ALL ophis exestent in THE
•	other eye making him incapable of continuing
	uitit the business
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:  Middle Weinstein
	362 gardens Parkury
	Apartment 603-B
	PAIM Beach gardens FL 33 410
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:
	Michael WeinsTein Printed Name

FILING FEE: \$25.00

15 MAY 13 AM 9: 16
SECRETARY OF STATE
ASSET FI ORIDA