L 60000022692

| (Req | uestor's Name) | |
|---------------------------|-----------------|-------------|
| (Add | ress) | |
| (Add | ress) | |
| (City | /State/Zip/Phor | ne #) |
| PICK-UP | ☐ WAIT | MAIL |
| (12 | | |
| (Bus | iness Entity Na | me) |
| (Doc | ument Number |) |
| Certified Copies | Certificate | s of Status |
| Special Instructions to F | iling Officer: | |
| | | |
| | | |
| | | |
| | | |
| | | |

Office Use Only

B. KOHR

JUN 27 2011

EXAMINER



500208550655

11 JUN 24 AM 10: 3

FILED
SECRUTARY OF STATE
DIVISION OF CORPORATION





ACCOUNT NO. : I2000000195

REFERENCE : 820061

AUTHORIZATION

COST LIMIT

ORDER DATE: June 21, 2011

ORDER TIME : 2:54 PM

ORDER NO. : 820061-005

CUSTOMER NO: 4305461

DOMESTIC FILINGS

NAME: NOP, LLC

XX ___ ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

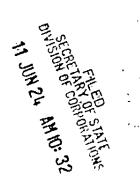
____ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT# 2956

EXAMINER'S INITIALS:





June 21, 2011

SUSIE KNIGHT CSC TALLAHASSEE, FL

SUBJECT: NOP, LLC

Ref. Number: L10000022692

RESUBMIT

Please give original submission date as file date.

We have received your document for NOP, LLC and the authorization to debit your account in the amount of \$25.00. However, the document has not been filed and is being returned for the following:

Please enter the date the dissolution was approved in Item 3.

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) 245-6914.

Buck Kohr Regulatory Specialist II

Letter Number: 411A00015094



ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

11 JUN 24 M. 10: 32

| | 1/2010 | | |
|---|---|--|--|
| 2. The Articles of Organization were filed on <u>03/01</u> L10000022692 | and assigned document number | | |
| 3. The date the dissolution was approved:06/24 | 1/2011 | | |
| 4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter). A written consent authorizing the dissolution was executed by all of the | | | |
| members of the Company. | | | |
| | | | |
| S. CIVIDOV. OND | | | |
| 5. CHECK ONE: | limited liability company have been paid or discharged. | | |
| | debts, obligations and liabilities pursuant to s. 608.4421. | | |
| | uted among its members in accordance with their respective | | |
| rights and interests. | dece unlong to memoris in accordance with their respective | | |
| 7. CHECK ONE: | | | |
| ✓ There are no suits pending against the comp | • • | | |
| Adequate provision has been made for the s | satisfaction of any judgment, order or decree which may be | | |
| entered against it in any pending suit. | | | |
| entered against it in any pending suit. | | | |
| | membership interests necessary to approve the dissolution: | | |
| | membership interests necessary to approve the dissolution: Printed Name | | |
| natures of the members having the same percentage of | | | |
| natures of the members having the same percentage of | Printed Name | | |
| natures of the members having the same percentage of | Printed Name Great American Life Insurance | | |
| natures of the members having the same percentage of | Printed Name Great American Life Insurance Company | | |

FILING FEE: \$25.00