

L12000102408

(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



900255552119

01/23/14--01011--003 **25.00

SECRETARY OF STATE
FALLS CHURCH, VA

2014 JAN 23 PM 1:16

FILED

JAN 28 2014

I CLINE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Nacre Group & Associates, 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:

Eyda Jove _____
(Name of Person)

Nacre Group & Associates, LLC

(Firm/Company)

11325 NW 16th ST.

(Address)

Pembroke Pines, FL 33026

(City/State and Zip Code)

For further information concerning this matter, please call:

_____ Eyda Jove _____ at (305-898-4545)
(Name of Person) (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

JAN 3 PM 1:16
FILED

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

1. The name of a limited liability company is

Nacre Group & Associates, LLC

2. The Articles of Organization were filed on August 9, 2012

and assigned document number L12000102408

3. The delayed effective date the dissolution if not effective on the date of filing:

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section

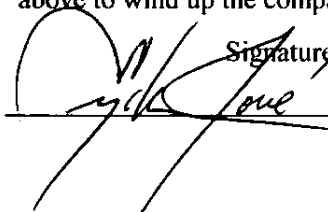
The company never got off the ground. Ms. Jove got very sick and could not do the business

605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

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

Eyda Jove
11325 NW 16th St.
Pembroke Pines, FL 33026

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

Printed Name

Eyda Jove

FILING FEE: \$25.00

FILED
2014 JAN 23 PM 1:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA