614000021116

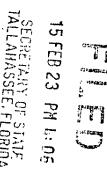
(Re	questor's Name)			
(Ad	dress)			
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

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02/23/15--01023--007 **25.00



T. Buren HARvad Mil

COVER LETTER

Division of Corporations				
SUBJECT: NewVISION Satellite S	ales and Service LLC			
(Name of Limited	l Liability Company)			
The enclosed Articles of Dissolution and fee(s) are submitted	d for filing.			
Please return all correspondence concerning this matter to the	e following:			
FRANK DUPIL	E			
(Name	of Person)			
(Firm/Company)				
87087 Kipling])/ Heron			
J (A	ouress)			
Yulu, LL	32097 and Zip Code)			
/ (City/State	and Zip Code)			
For further information concerning this matter, please call:				
Frank Duple (Name of Person)	at (<u>904</u>) <u>223-534/</u> (Area Code & Daytime Telephone Number)			
,				
Enclosed is a check for the following amount: \$\frac{1}{25.00}\$ Filing Fee and Certificate of Dissolution				
\$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			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is New VISION Satellite Sales and Service LLC.	
2.	The Articles of Organization were filed on $\frac{\partial/\partial/\partial 2014}{\partial}$ and assigned	
	document number <u>44000021116</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).	
	No success in gainful profit. Lack of profit and	
	ability to continue business activities.	
	J / LLANGE T.	elic;
	EB 23	ni Tiber Pullen
5.	If there are no members, enter the name and address of the person appointed to wind up the company's	
	activities and affairs: Fronk Duple 975	ineri
	87087 Kipling Dr	
	Yulee, FZ 32097	
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:	
	Frank Dapi 2/ FRANK DUPIE	
	Signature Printed Name	

FILING FEE: \$25.00

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: New VISION Satellite Sales and	Senu	ce l	<u> 1</u>
Document number of Limited Liability Company is: <u>L14000021116</u>			_
Date of dissolution was: 2/18/14			
Description of information that must be included in a written claim:	TALLAH	15 FEB	4
	AKY WKY	23	
	E S E S	2	i i
	TATE ORIDA	3	Maran P
			_
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corpo $\frac{87087 \text{ Kipling Dr Frank Dupie}}{\text{Yulee FL},32097}$	orations)	ı	
<u> 44 lee FL, 32097</u>			

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.

Frinted Name of the Person Filing

2 / 18 / 14 FRANK DUPIC

Signature of the Person Filing

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