

L14000071867

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

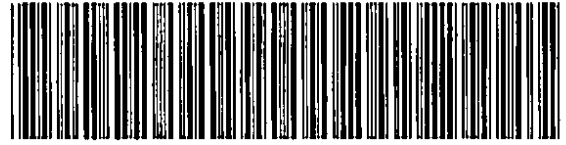
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/28/19-- 0013 -027 \$425.00

2019 MAR 28 PM 9:13
CLERK OF STATE
TALLAHASSEE FLORIDA

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D. BRUCE
APR 08 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **NS PROCESSING SOLUTIONS, 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:

PASHA SOLLINGER

(Name of Person)

NS PROCESSING SOLUTIONS LLC

(Firm/Company)

110 E. BROWARD BLVD. #1700

(Address)

FORT LAUDERDALE, FL 33301

(City/State and Zip Code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2019 MAR 28 PM 3:13

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For further information concerning this matter, please call:

PASHA SOLLINGER

(Name of Person)

at (

954

683-2874

(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

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

1. The name of a limited liability company is
NS PROCESSING SOLUTIONS, LLC

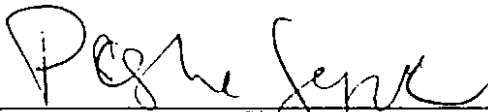
2. The Articles of Organization were filed on MAY 2, 2014 and assigned
document number L14000071867

3. The delayed effective date the dissolution if not effective on the date of filing: 03/31/2019
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be
listed as the document's effective date on the Department of State's records.

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).
Managing member has moved out of the State of Florida since the LLC was formed.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: Pasha Sollinger - 7520 Heather Knoll Circle, Las Vegas NV 89129

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

Pasha Sollinger

Printed Name

FILING FEE: \$25.00

FILED
2019 MAR 28 PM 3:13
CLERK OF THE COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA