

L15000086314

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

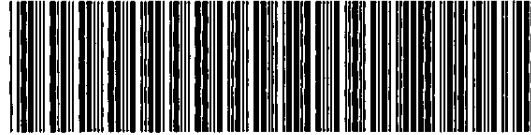
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2015 DEC 30 PM 4:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

M. O'Connell DEC 31 2015

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** N. Aloi Law, PLLC  
(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:

Nicole Aloi  
(Name of Person)  
N. Aloi Law, PLLC  
(Firm/Company)  
3811 Union Pacific Drive West  
(Address)  
Jacksonville, FL 32246  
(City/State and Zip Code)

For further information concerning this matter, please call:

Nicole Aloi at ( 865 ) 567-3075  
(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

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

FILED  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is  
N. Aloï Law, PLLC

2. The Articles of Organization were filed on 05/15/2015 and assigned  
document number L15000086319

3. The delayed effective date the dissolution if not effective on the date of filing: N/A  
(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).  
The sole proprietor secured employment with another firm.

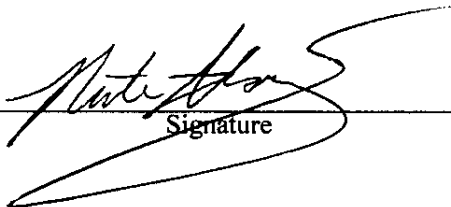
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Nicole Aloï

3811 Union Pacific Drive West

Jacksonville, FL 32246

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

Nicole Aloï

Printed Name

FILING FEE: \$25.00