115000/69514

(Red	questor's Name)	-		
. (Add	dress)			
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(City	y/State/Zip/Phone	=#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



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COVER LETTER

TO:	Registration Section
	Division of Corporations

NCT-151, 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:

c/o Theodore E. Day, Jr. (Name of Person) NCF Corporation (Firm/Company) 707 N. Franklin Street, Ste 800 (Address) Tampa, FL 33602

(City/State and Zip Code)

For further information concerning this matter, please call:

Theodore E. Day, Jr. 404

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 liabili	ty company is		·	
2.	The Articles of Organization	were filed on September	28, 2015	and assigned	
	document number L1500016	9514	-		
3.	The delayed effective date the (effective of Note: If the date inserted in the listed as the document's effective of the comment's effective of the Note: If the date inserted in the listed as the document's effective of the Note: If the date inserted in the Note: If the Note: I	date cannot be prior to or more his block does not meet the a	than 90 days later than da applicable statutory filir	ing: ate document is received for filing) ag requirements, this date will not	be
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 consent of all members.		·		
			<u> </u>		
5.	If there are no members, enter the name and address of the person appointed to wind up the company activities and affairs: Authorized Person of the limited liability company				
	activities and arrans.		 	2018 SEC TALL	
				AHA V	7
				38.5 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0	F
				E PAR	П
6. li:	Signature of an authorized p sted above to wind up the con	erson or if there are no m pany's activities and affa	nembers, the signature	e of the person appointed and	
	2 111				
٥	111,66		Mytrinh McGrath		
_	Cianatura		Prin	ted 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: NCT-151, LLC	
Document number of Limited Liability Company is: L15000169514	
Date of dissolution was:	
Description of information that must be included in a written claim:	
Claimant's name and address	
Date of original claim	
Basis of claim (contract, invoice, etc.)	
Copy, if any, of written evidence of claim	
Amount of claim	2018 J
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corpdia	TIC TO THE TOTAL T
NCF Corporation	PH 4: 23
c/o General Counsel	చ
707 N. Franklin Street, Ste 800	
Tampa, FL 33602	

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.

Mytrinh McGrath

Printed Name of the Person Filing

/Signature of the Person Filing

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