

L16 0000 83760

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

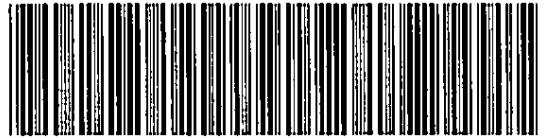
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/06/19--01006--014 **25.00

FILED

2019 MAR -6 AM 9:50

STATE OF FLA

FILED
MAR 10 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NDT AMELIA, 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:

JOHN E. MEIERDIERCK
(Name of Person)

NDT AMELIA, LLC
(Firm/Company)

2561 Pirates Bay Drive
(Address)

Fernandina Beach, Florida 32034
(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN MEIERDIERCK at (904) 261-7533
(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

2019 MAR -6 AM 9:50

1. The name of a limited liability company is

NDT AMELIA, LLC

SECRETARY OF STATE
TALLAHASSEE, FL

2. The Articles of Organization were filed on 4/28/2016 and assigned

document number L16000083760

3. The delayed effective date the dissolution if not effective on the date of filing: 3/15/2019
(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).

I have decided to retire from my business STARTING
3/15/2019.

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

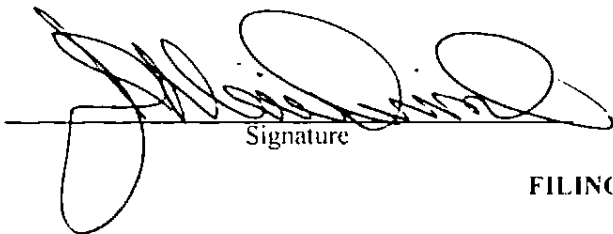
John Meierdierck

2561 Pirates bay drive

Fernandida Beach, Florida

32034

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

John Meierdierck
Printed Name

FILING FEE: \$25.00