116000195263

(Re	equestor's Name)	·····
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies		
Special Instructions to	Filing Officer:	
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COVER LETTER

TO:

Registration Section Division of Corporations

SHRIECT

Nee Holdings, 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:

Timothy R. N	Vee	
	(Name of Person)	
	(Firm/Company)	
1566 N. Mea	adowcrest Blvd	
	(Address)	
Crystal River	FL	34429
	(City/State and Zip Code)	 -

For further information concerning this matter, please call:

Timothy R. Nee

__352

419-4890

(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

The name of a limited liability comp	any is	
Nec Holdings, LLC		
The Articles of Organization were fi	led on 10/24/2016	and assigned
document number L16000195263		
The delayed effective date the disso (effective date cannot	ution if not effective on the d	ate of filing: 10/21/2016
Note: If the date inserted in this block listed as the document's effective date	does not meet the applicable state	utory filing requirements, this date will not be
A description of occurrence that rest 605.0707, Florida Statutes, (copy 60:	ulted in the limited liability co 5.0707 on back cover letter).	ompany's dissolution pursuant to section
No business matters to attend to.		
If there are no members, enter the na activities and affairs:	·	appointed to wind up the company's
	-	
		· · · · · · · · · · · · · · · · · · ·
		*
		· .
Signature of an authorized person or sted above to wind up the company's	if there are no members, the sactivities and affairs:	signature of the person appointed and
Luin	Timothy R. N	Nee
My Wignature		Printed Name
/	FILING FFE: \$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 Compa	_{ny:} Nee Holdings, L	LC	
Document number of Limited Lial	hility Company is: L16000	195263	
Date of dissolution was: 10/21	1/2016		
Description of information that mu	ust be included in a written clair	m:	
Date of occurrence, any and all re	ecords regarding such occurre	nce, detailed description of occurr	ence
			, 1
,			- 195 - 195
			<u>-</u> =
Mailing address where claims can	·	to the Division of Corporations)	
Crystal River	FL	34429	
A claim against the above named lealing is commenced within 4 years		e barred unless a proceeding to en	force the
Timothy R. Nee		1. 12	
-	<i>x</i>		

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