

L16000 223487

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

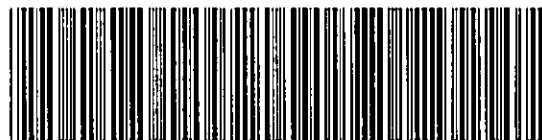
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/06/20--01011--002 **50.00

2020 APR 18 PM 3:17

C. GOLDEN

APR 18 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NCT-165, 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 Bradley Orr

(Name of Person)

NCF Corporation

(Firm/Company)

1901 Ulmerton Rd., STE 400

(Address)

Clearwater, FL 33762

(City/State and Zip Code)

For further information concerning this matter, please call:

Bradley Orr

(Name of Person)

at (404) 252-0100

(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



2020 APR 10 PM 12:43

FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 22, 2020

C/O BRADLEY ORR
NCF CORPORATION
1901 ULMERTON ROAD #400
CLEARWATER, FL 33762

SUBJECT: NCT-165, LLC
Ref. Number: L16000223487

We have received your document and check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You must enter the name and address of the person appointed to wind up the company's activities and affairs.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 620A00008384

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

2020 MAY 18 PM 3:17

1. The name of a limited liability company is
NCT-165, LLC

2. The Articles of Organization were filed on December 9, 2016 and assigned
document number L16000223487

3. The delayed effective date the dissolution if not effective on the date of filing: _____
(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 consent of all members.

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

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

Mytrinh McGrath, Authorized Person
Printed 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-165, LLC

Document number of Limited Liability Company is: L16000223487

Date of dissolution was: March 23, 2020

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

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

NCF Corporation

c/o General Counsel

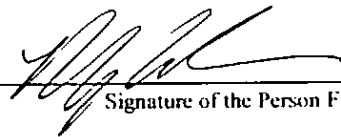
1901 Ulmerton Rd., STE 400

Clearwater, FL 33762

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, Authorized Person

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