

L17000152776

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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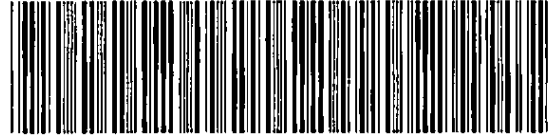
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2024 NOV 13 AM 9:36

STATE
TALLAHASSEE, FLORIDA

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STATE
TALLAHASSEE, FLORIDA

Incorporating Services, Ltd.

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Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com
e-mail: accounting@incserv.com

ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau
mmoreau@incserv.com
850.656.7953

REQUEST DATE 11/13/2024

PRIORITY Regular Approval

OUR REF # (Order ID#) 1317344

ORDER ENTITY
NG ADVISORS LLC

PLEASE PERFORM THE FOLLOWING SERVICES:
NG ADVISORS LLC (FL)

File the attached dissolution document

NOTES:
\$25.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and
counner package if applicable. For UCC orders, please include the thru date on the results.

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

2024 NOV 13 AM 9:36

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

NG Advisors LLC

2. The Articles of Organization were filed on 17/07/2017 and assigned

document number L17000152776

3. The delayed effective date the dissolution is 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 the 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

Martin Otero Monsegur

Printed Name

FILING FEE: \$25.00