

218000071693

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

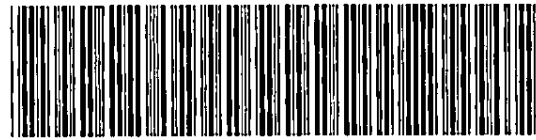
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/26/18--01049--011 **25.00

UTB
11-25-18

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2018 NOV 26 AM 9:08
SECRETARY OF STATE
TALLAHASSEE, FL

CHRISTOPHER P. KELLEY, P.A.

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November 20, 2018

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, Florida 32314

RE: ARTICLES OF DISSOLUTION
NORPECK, LLC, a Florida Limited Liability company

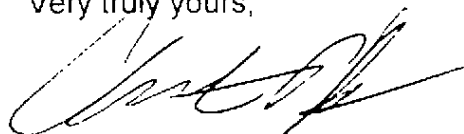
Dear Madam or Sir:

Enclosed please find my firm's check in the amount of **\$25.00**, along with **Articles of Dissolution** for **Norpeck, LLC, a Florida limited liability company**.

Please return the acknowledgment and **Certificate of Dissolution** to our office.

Please call me should you have any questions.

Very truly yours,



CHRISTOPHER P. KELLEY

CPK:rd
Enclosures
\$25.00 Fee & Certificate of Dissolution

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED

2018 NOV 26 AM 9:08

SECRETARY OF STATE
TALLAHASSEE, FL

1. The name of a limited liability company is
NORPECK, LLC

2. The Articles of Organization were filed on 03/20/2018 and assigned
document number L18000071693

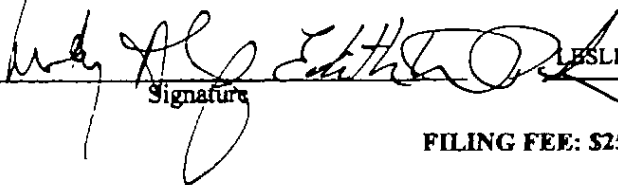
3. The delayed effective date the dissolution if not effective on the date of filing: 12/01/2018
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, 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).

SOLE ASSET OF THE LIMITED LIABILITY COMPANY WAS TRANSFERRED TO 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

LESLEY A. NORTHUP & EDITH D. PECK

Printed Name

FILING FEE: \$25.00