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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FL.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NCT-202005, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robin Wilsey

Name of Person

National Christian Foundation

Firm/Company

11625 Rainwater Dr., Suite 500

Address

Alpharetta, GA 30009-

City/State and Zip Code

rwilsey@ncfgiving.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robin Wilsey at (470) 633-6344

Name of Person Area Code Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF TERMINATION

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Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Termination:

FIRST: The name of the limited liability company is: NCT-202005, LLC

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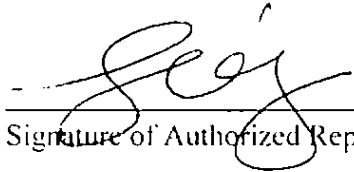
SECRETARY OF STATE
TALLAHASSEE, FL

SECOND: The Florida Document number of the limited liability company is: L20000358927

THIRD: The date of filing of the initial articles of organization is: November 12, 2020

FOURTH: The date of filing of the dissolution is: February 28, 2022

FIFTH: This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.



Signature of Authorized Representative

Robin Wilsey

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)