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COVER LETTER

TO: SUBJ	Registration Section Division of Corporations ECT:	NCT-202202, LLC Name of Limited Liab	bility Company		
Dear S	Sir or Madam:				
The er	nclosed Statement of Termi	nation and fee(s) are subm	uitted for filing.		
Please	return all correspondence of	concerning this matter to t	he following:		
Robin	Wilsey				
	Name of Pe	rson	-		
Nation	al Christian Foundation				
	Firm/Comp	any	-		
1901 L	Ilmerton Road, Suite 400				
	Address		-		
Clearw	vater, FL 33762		_		
	City/State and Zip	Code			
	y@ncfgiving.com				
E-ma	il address: (to be used for f	uture annual report notific	ation)		
For further information concerning this matter, please call:					
Robin	Wilsey	470 at (633-6344		
	Name of Person	Area Code	e 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		

CR2E141 (2/14)

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STATEMENT OF TERMINATION

Pursuant to section 605.0709(7),	Florida Statutes, I hereby submit the following	g Statement of Termination:
FIRST: The name of the limited	liability company is: NCT-202202, LLC	
SECOND: The Florida Docume	ent number of the limited liability company is:	L22000262962
THIRD: The date of filing of the	e initial articles of organization is: 06/08/2022	
FOURTH: The date of filing of	the dissolution is:09/26/2022	
FIFTH: This limited liability conthat it will file a statement of term	npany has completed winding up its activities nination.	and affairs and has determined
Signature of Authorized Represen	Robin Wilsey ntative Typed or printed name of sign	22 OCT 11 AM 5: 3
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	co _y
CR2E141 (2/14)		