

P06000148540

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

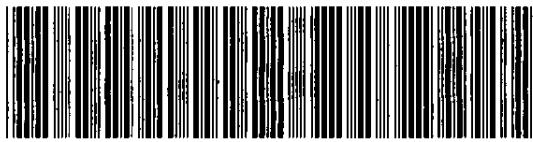
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

miss
C.COULLIETTE

JAN 12 2010

EXAMINER

COVER LETTER

**TO: Amendment Section
Division of Corporations**

SUBJECT: Dissolution of Corporation

DOCUMENT NUMBER: P06000148540

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Fujs MARRERO

(Name of Contact Person)

NCA AIR CONDITIONING, INC.

(Firm/Company)

9441 Evergreen Pl Apt. 202.

(Address)

Davie, FL. 33324

(City/State and Zip Code)

For further information concerning this matter, please call:

Luis Marquez

please call:
954 529 7546
at (954) 693 9472

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

MAILING ADDRESS:

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

STREET ADDRESS:

**Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301**

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

NCA AIR CONDITIONING INC.

SECOND: The document number of the corporation (if known): P06000148540

THIRD: The date dissolution was authorized: December 31, 2009

Effective date of dissolution if applicable: December 31/2009
(no more than 90 days after dissolution file date)

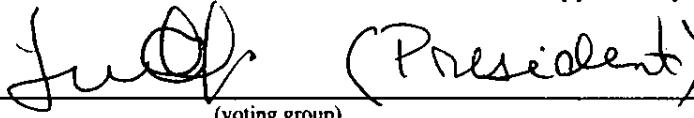
FOURTH: Adoption of Dissolution (CHECK ONE)

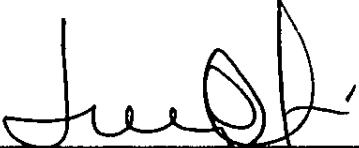
Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

Dissolution was approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

 (President)
(voting group)

Signature: 

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, that fiduciary)

LUIS MARRERO.

(Typed or printed name of person signing)

President.

(Title of person signing)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Filing Fee: \$35