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(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)	-
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Name)	
(Document Number)		
Certified Copies	Certificates of S	Status
Special Instructions to	Filing Officer:	

Office Use Only



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K. Hester 12/3/24

COVER LETTER

TO: Amendment Section **Division of Corporations** DISSOLUTION SUBJECT: P20000067049 DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: NANCY C MEJIA (Name of Contact Person) NANCOPR SERVICE INC (Firm/Company) 26251 NOTTINGHAM LN (Address) **BONITA SPRINGS, FL 34135** (City/State and Zip Code) For further information concerning this matter, please call: (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: □ \$35 Filing Fee ■ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status Certificate of Status & Certified Copy (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) Mailing Address: Street Address: Amendment Section Amendment Section **Division of Corporations Division of Corporations** The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

P.O. Box 6327

Tallahassee, FL 32314

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

NANCORP SERVICES INC Name of Corporation:
The above named corporation is the subject of dissolution and the effective date of a dissolution is:
(date filed with the Dept, if date specified in the Articles of Dissolution)
Description of information that must be included in a claim:
NO BUSINESS
Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations) 26251 NOTTINGHAM LN
BONITA SPRING, FL 34135
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
Nancy C Mejea Printed Name of the Person Filing Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00

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: NANCORP SERVICES INC		
SECOND:	The document number of the corporation (if known):		
THIRD:	The date dissolution was authorized:		
	Effective date of dissolution if applicable:		
	(no more than 90 days after dissolution file date) 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.		
FOURTH:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.		
:	Signature: (By a director, prosident or other officer of directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by		
	that fiduciary)		
	NANCY C MEJIA		
	(Typed or printed name of person signing)		
	OWNER		
	(Title of person signing)		

Filing Fee: \$35

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NANCORP SERVICES INC Name of Corporation:
The above named corporation is the subject of dissolution and the effective date of a dissolution is: 08/24/2024
(date filed with the Dept. if date specified in the Articles of Dissolution)
Description of information that must be included in a claim:
NO BUSINESS
,
Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations) 26251 NOTTINGHAM LN
BONITA SPRING, FL 34135
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commence within 4 years after the filing of this notice.
Nancy C Mejica Multi Gate Value Printed Name of the Person Filing Signature of the Person Filing
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FOURTH:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.
Ş	Signature: Mat Gat Mut
	(By a director, phosident 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, by that fiduciary)
	NANCY C MEJIA
	(Typed or printed name of person signing)
	OWNER
	(Title of person signing)

Filing Fee: \$35