

L1200000 4637

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

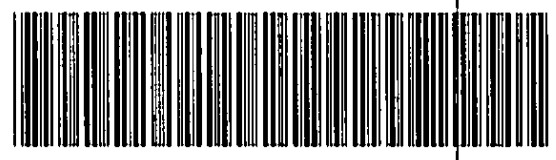
(Document Number)

Certified Copies _____ Certificates of Status _____

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Wrong form

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SECRETARY OF STATE
MAIL SERVICES PLAZA

2019 APR 18 PM 3:18

APPROVED
AND
FILED

T.G.
04/19/19



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 5, 2019

ZILCUL LLC
1110 BRICKELL AVE., STE 310
MIAMI, FL 33131

SUBJECT: ZILCUL LLC
Ref. Number: L12000004637

We have received your document for ZILCUL LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tacarri K Glass
Regulatory Specialist II

Letter Number: 519A00006824

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2019-APR-18 PM 3:18

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AND
FILED

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
ZILCUL LLC

2. The Articles of Organization were filed on January 10, 2012 and assigned
document number L12000004637

3. The delayed effective date the dissolution if not effective on the date of filing: March 16, 2019
(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).
Company will no longer be conducting business.

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 listed above to wind up the company's activities and affairs:

Nilo Sergio da Silva

Signature

Nilo Sergio da Silva

Printed Name

2019 APR 18 PM 3:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED