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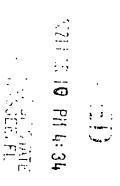
(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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LYBY 1 P. SOSI





February 17, 2021

JEANIE FORMAN BOHALL 2020 FARNSWORTH DR COLORADO SPRINGS, CO 80916

SUBJECT: FIRST COAST ZERONA, LLC

Ref. Number: L10000114815

We have received your document for FIRST COAST ZERONA, LLC and your check(s) totaling \$52.50. 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).

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Letter Number: 921A00003562

Yasemin Y Sulker Regulatory Specialist III

www.sunbiz.org

COVER LETTER

	ration Section on of Corporations			
SUBJECT:	FIRST	COAST Z	ERONA,	LLC
		(Name of Limite	d Liability Compa	any)
The enclosed A	rticles of Dissolution ar	id fee(s) are submitte	ed for filing.	
Please return al	l correspondence conce	rning this matter to t	he following:	
		FROMAIU (Nam	- BOHALL	
		(¡Nam	e of rerson)	
	<u>. </u>			
		(Fim	/Company)	
	2020	FARNSW	ORTH DI	₹
		(7	Address)	
	Col	RADO SPR	INGS,	COLORADO 80916
		(City/Stat	e and Zip Code)	
For further info	ormation concerning this	matter, please call:		
75	AIUIE FROMAN	- BOHAL	at (<u>904</u>	Node & Daytime Telephone Number)
	(Maine VIII e.	50.11)	(,
Enclosed is a che	eck for the following amou	nt:		
□ \$2 5.00	Filing Fee and Certificate	of Dissolution		g Fee, Certificate of Dissolution & Copy (additional copy is enclosed)
			Street Address:	
Registration Section Division of Corporations			Registration Section Division of Corporations	
P.O. Box 6327		The Centre	The Centre of Tallahassee	
Talla	hassee, FL 32314		2415 N. Mo Tallahassee	onroe Street, Suite 810
			1 arrana5500	, i L J L J V J

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

١.	The name of a limited liability company is
	FIRST COAST ZERONA, LLC
2.	The Articles of Organization were filed on 11/04/2010 and assigned
	document number <u>L10000114815</u>
3.	The delayed effective date the dissolution if not effective on the date of filing: 31 DEC 2020 (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).
	ALL MEMBERS OF FIRST COAST ZERONA, LLC, GAVE WRITTEN
	CONSENT FOR THE DISSOLUTION OF FIRST COAST ZEROWA
	ON 31 DEC 2020.
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. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed pove to wind up the company's activities and affairs:
_	JEANIE FROMAN - BOHALL Signature Printed Name
	Signature (Timed Wante

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

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

Name of Limited Liability Company: FIRST COAST ZERONA, LLC
Document number of Limited Liability Company is: <u>L10000114815</u>
Date of dissolution was: 31 DEC 2020
Description of information that must be included in a written claim:
REQUIRED INFORMATION FOR A CLAIM IS TO INCLUDE: DATE OF
PURCHAGE OR TRANSACTION, METHOD OF PAYMENT, AMOUNT OF
PAYMENT, DOCUMENTATION THAT SERVICE WAS NOT PROVINCE.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
2020 FARNSWORTH DR
COLORADO SPRINGS. CO 80916
A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
JEANIE FROMAN - BOHAU Printed Name of the Person Filing Signature of the Person Filing
Printed Name of the Person Filing Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00