

L12000105702

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK UP

☐

WAIT

☐

MAIL

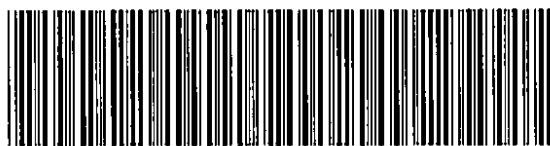
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

Office Use Only



900365579259

RECEIVED
MAY 12 12:45 PM
SECRETARY OF STATE
TALLAHASSEE, FL

05/04/21--01030--017 **25.00

RECEIVED
2021 MAY -4 PM 2:08
SECRETARY OF STATE
TALLAHASSEE, FL

MAY 05 2021

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Z-SURF LLC

Signature _____

Requested by: _____

Name _____ Date _____ Time _____

Walk-In _____ Will Pick Up _____

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Z Surf, LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Nestor Gorfinkel

(Name of Person)

Gorfinkel Law

(Firm/Company)

20200 W Dixie Highway Suite 1103

(Address)

Aventura, FL 33180

(City/State and Zip Code)

For further information concerning this matter, please call:

Nestor Gorfinkel

(Name of Person)

at (305) 932-5757

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee and Certificate of Dissolution

☐ \$55.00 Filing Fee, Certificate of Dissolution &
Certified Copy (additional copy is enclosed)

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

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

1. The name of a limited liability company is

Z SURF, LLC

2. The Articles of Organization were filed on 08-16-2012 and assigned

document number L12000105702

3. The delayed effective date the dissolution if not effective on the date of filing: May 15, 2021
(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).

Consent by the members representing 100% Ownership Interest

Consent by the members representing 100% Ownership Interest

Consent by the members representing 100% Ownership Interest


5. If there are no members, enter the name and address of the person appointed to wind up the company's

activities and affairs: Ruth Zelcer

5000 Island Estate Drive # 608S

Aventura, FL 33160

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:


Signature

Ruth Zelcer

Printed Name

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: Z SURF, LLC

Document number of Limited Liability Company is: L12000105702

Date of dissolution was: 05/15/2021

Description of information that must be included in a written claim:

Name of Claimant, Claimant address, Amount Claimed, Account number and or Invoice number (if applicable),

the Date the Claim or debt incurred, maturity date (if applicable) and detailed history of claim or debt.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Ruth Zelcer

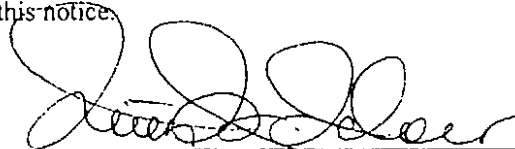
5000 Island Estate Drive # 608S

Aventura, FL 33160

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.

Ruth Zelcer

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