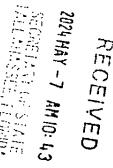


(Requestor's Name)
(Address)
(Address)
(Addless)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J. HORNE MAY - 8 2024
MAY
8 2024





05/07/24--01002--020 **25.00





FLORIDA RESEARCH & FILING SERVICES, INC.

4044 LONGLEAF CT

TALLAHASSEE, FL 32310

PH: 850-524-4381

PLEASE FILE THE ATTACHED DISSOLUTION FOR:

AGC FAMILY LLC

PLEASE RETURN A STAMPED COPY

CHECK: #9877 AMOUNT: \$25.00

THANK YOU

ARTICLES OF DISSOLUTION OF ZUZHHAY -7 AM 9: 58 AGC FAMILY LLC

Pursuant to Section 605.0707, Florida Statutes, this Florida limited liability company submits the following articles of dissolution:

FIRST: The name of the limited liability company as currently filed with the Florida

Department of State is AGC FAMILY LLC.

SECOND: The Articles of Organization were filed on October 20, 2021 and assigned Document

Number L21000455977.

THIRD: The effective date of the dissolution shall be upon the filing of the Articles of

Dissolution with the Secretary of State of the State of Florida.

FOURTH: Description of occurrence that resulted in the limited liability company's dissolution

pursuant to section 605.0707, Florida Statutes:

FIFTH: Alice Grinberg was appointed by the members to wind up the company's activities

and affairs.

Signed this 22 day of April , 2024.

AGC FAMILY LLC

By:

Alan Salomon Grinberg Cohen

Sole Member

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NOTICE OF LIMITED LIABILITY COMPANY DISSOLUTION

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 Section 605.0712, F.S.

The date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

FIRST: The name of the dissolved limited liability company is: AGC

FAMILY LLC

SECOND: Document Number of Limited Liability Company is:

L21000455977

THIRD: Date of dissolution was:

FOURTH: The information to be provided in the claim shall include the date

of the claim, the amount of the claim, and the name of the creditor.

FIFTH: The mailing address where claims can be sent is as follows:

Alan Salomon Grinberg Cohen c/o 8950 SW 74th Ct, Suite 1901 Miami, FL 33156

SIXTY: A claim against the above named corporation will be barred unless

a proceeding to enforce the claim is commenced within four (4)

years after the filing of this notice.

Alice Grinberg Sole Manager