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(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
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Special Instructions to Filing Officer:					
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COVER LETTER

TO:	Registration Section Division of Corporations						
SHRI	VCA CONSULTING LLC						
SUBJECT: (Name of Limited Liability Company)							
	nclosed Articles of Dissolution and fee(s) are submitted to the						
	VALERIE CASTILLO						
	(Name of Person)						
	VCA CONSULTING, LLC						
	(Finn/Company)						
	950 NE 88TH STREFT						
	(Address)						
	MIAMI, FL 33138						
	(City/State ar	nd Zip Code)					
For fu	orther information concerning this matter, please call:						
	VALERIE CASTILLO	787 224-0977 at ()					
	(Name of Person)	(Area Code & Daytime Telephone Number)					
Enclos	sed 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	Street Address: Registration Section					
	Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee					
Tallahassee, FL 32314		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 VCA CONSULTING LLC					
2.	The Articles of Organization	on were filed on 03/29/2022	and assigned	d		
	document number 1.220001	53145				
3.	Note: If the date inserted in	the dissolution if not effective on the e date cannot be prior to or more than 90 day this block does not meet the applicable etive date on the Department of State's i	statutory filing requirements, th	ived for filing) his date will not be		
4.	A description of occurrence 605.0707, Florida Statutes,	e that resulted in the limited liability (copy 605.0707 on back cover letter)	company's dissolution purs			
	DUE TO INACTIVITY OF T	HE BUSINESS		023		
				2023 APR		
				<u> </u>		
				·/- 😑 17		
				<u> </u>		
5.	If there are no members, en activities and affairs:	ter the name and address of the pers VALERIE CASTILLO	on appointed to wind up the	company's		
		950 NE 88TH ST				
		MIAMI, FL 33138				
6. ab	Signature of an authorized pove to wind up the company	person or if there are no members, the activities and affairs:	ne signature of the person ap	pointed and listed		
	Warre the	<u></u>				
	Signaturo	VALERII	ECASTILLO Printed Name			
	- / Alguarate	FILING FEE: \$25.0				
		E SESTEMBE E DELL \$250.00	v			