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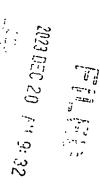
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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200420589232

12/20/23--01014--018 **25.00



COVER LETTER

TO: Registration Section Division of Corporat	ions			
ZELCOR HOLI	DINGS LLC			
SUBJECT: (Name of Limited Liability Company)				
The enclosed Articles of Diss	olution and fee(s) are submit	ated for filing.		
Please return all corresponder	ice concerning this matter to	the following:		
MARCELO	A CALVOPINA	<u></u>		
(Name of Person)				
ZELCOR H	OLDINGS ULC			
(Firm/Company)				
10956 NW 5	STH TERRACE			
	(Address)			
DORAL FL	33178			
	(City/St	ate and Zip Code)		
For further information conce	rning this matter, please call	l:		
MARCELO A CAL	VOPINA	602 466-1371 at ()		
(8)	ame of Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a check for the follo	wing amount:			
S25,00 Filing Fee and Certificate of Dissolution		☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)		
Mailing Address:		Street Address:		
Registration Section		Registration Section Division of Corporations		
Division of Corporations P.O. Box 6327		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	
	ZELCOR HOLDING LLC	<u></u> .
2.	The Articles of Organization were filed on 12	/13/2023 and assigned
	document number 0010	
3.	The delayed effective date the dissolution if n (effective date cannot be prior t Note: If the date inserted in this block does not n listed as the document's effective date on the Dep	neet the applicable statutory filing requirements, this date will not be
4.	A description of occurrence that resulted in th 605.0707, Florida Statutes, (copy 605.0707 on	e limited liability company's dissolution pursuant to section back cover letter).
	INSOLVENCY TO CONTINUE INVESTMENT	ON THE COMPANY
		2073 DEC 20
5.	If there are no members, enter the name and a activities and affairs:	address of the person appointed to wind up the company's
6. at	Signature of an authorized person or if there a pove to wind up the company's activities and a	are no members, the signature of the person appointed and listed ffairs:
, J	MRCELO CADIOPINA	MARCELO A CALVOPINA
7	Signature	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: ZELCOR HOLDINGS	LLC
Document number of Limited Liability Company is: 010	
Date of dissolution was: 12/13/2023	
Description of information that must be included in a writt	en claim:
INSOLVENCY TO CONTINUE INVESTMENT ON THE CO	MPANY
Mailing address where claims can be sent: (Claims cannot	be sent to the Division of Corporations)
4320 NW 107TH AVE APT 302	
MIAMI FL 33181	
A claim against the above named limited liability company claim is commenced within 4 years after the filing of this r	
MARCELA A CALVOPINA	
Printed Name of the Person Filing	Signature of the Person Filing