

L65000162610

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

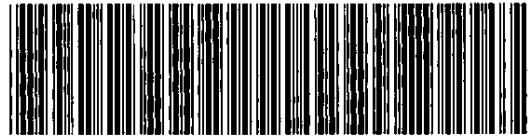
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800181885918

06/10/10--01022--005 **55.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 JUN 10 AM 10:44

T. HAMPTON

JUN 11 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VB STAFFING 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:

VIVIAN BRAGA

(Name of Person)

VB STAFFING LLC

(Firm/Company)

16273 SW 18TH PL

(Address)

MIRAMAR, FLORIDA. 33027

(City/State and Zip Code)

For further information concerning this matter, please call:

VIVIAN BRAGA

(Name of Person)

at (954) 6635179

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☒ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee.
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 JUN 10 AM 10:44

1. The name of a limited liability company is

VB STAFFING LLC

2. The Articles of Organization were filed on OCTOBER 17, 2005 and assigned document number L050001020610

3. The date the dissolution was approved: 01012010

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

NO WORK CONTRACT SINCE 01/01/2009

5. CHECK ONE:

- ☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.
-OR-
☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

- ☒ There are no suits pending against the company in any court.
-OR-
☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

Vivian A. Braga
Emilie SIA
Imelda Pabon

VIVIAN BRAGA

EMILIE SIA

IMELDA PABON