# L06000021022

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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

NOV - 2 2009

**EXAMINER** 

### **COVER LETTER**

VEAPLANT 4, LLC
Name of Limited Liability Company SUBJECT: L06000021022 DOCUMENT NUMBER: \_\_\_ The enclosed Resignation of Registered Agent for a-Limited Liability Company and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **EVELYN URDANETA** Name of Person Name of Firm/Company **1825 MAIN ST** Address WESTON, FLORIDA 33326 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 754 ) 234-3393
Area Code & Daytime Telephone Number EVELYN URDANETA Name of Person Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn

### MAILING ADDRESS:

limited liability company.

Amendment Section

Division of Corporations

TO:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

### STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

09 OCT 30 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

October 21, 2009

ISABEL MARTINEZ CHARM CONSULTING LLC 1825 MAIN ST WESTON, FL 33326

SUBJECT: VERA PLANT 4, LLC Ref. Number: L06000021022

We have received your document for VERA PLANT 4, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 809A00033541

# RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisio	is of section 608.416(2) or 608.509, Florida Statutes, the undersigned,	
	EVELYN URDANETA , hereby resigns as	
	Name of Registered Agent	
Registered Agent for	VERAPLANT 4, LLC	-
	VERAPLANT 4, LLC	,
	Name of Limited Liability Company	•
L06000	021022	
Document Nu	nber, if known	
A copy of this resignation	n was mailed to the above listed limited liability company at its last known address.	
The agency is terminated	and the office discontinued on the Renday after the date on which this statement is	filed.
	Signature of Resigning Agent	
If signing on behalf of a	entity:	
	EVELYN URDANETA	
	Typed or Printed Name	
	REGISTER AGENT	
	Capacity	

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

Make checks payable to Florida Department of State and mail to: **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314