

L08000038392

(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



700263407977

09/25/14--01003--006 \*\*25.00

EFFECTIVE DATE:

10/11/14

FILED

2014 SEP 25 AM 10:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Gungun

OCT 13 2014

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LAW Offices of Serra & Vedmed, 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:

Smart Tax Accounting/Roland Schwend  
(Name of Person)

Smart Tax Accounting  
(Firm/Company)

1860 N. Pine Island Rd., Suite 104  
(Address)

PLANTATION, FL. 33322  
(City/State and Zip Code)

For further information concerning this matter, please call:

Roland Schwend at (954) 474-1660  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

1 \$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  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 1, 2014

SMART TAX ACCOUNTING  
1860 N. PINE ISLAND RD  
SUITE 104  
PLANTATION, FL 33322

SUBJECT: LAW OFFICES OF SERRA & VEDMED, LLC  
Ref. Number: L08000038392

We have received your document for LAW OFFICES OF SERRA & VEDMED, 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):

The effective date must be specific and cannot be prior to the date of filing.

Dissolution was received on 09/25/14.

Please return 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) 245-6051.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 414A00020965

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

LAW OFFICES OF SERRA & VEDMED, P. A.

2. The Articles of Organization were filed on 4/16/2008 and assigned

document number L08000038392

3. The delayed effective date the dissolution if not effective on the date of filing: 10/11/2014  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

All members of LLC voluntarily  
consent to dissolution, per statute  
605.0707.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Angelique Serra  
12150 SW 128th Ct. Ste 209  
MIAMI, FL. 33186-4667

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

X [Signature]  
Signature

Angelique Serra.  
Printed Name

FILING FEE: \$25.00

SECRETARY OF STATE  
ALLAHAMSEI, FLORIDA

2014 SEP 25 AM 10:50

FILED

## 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: LAW Offices of Serra & VEDMED, LLC.

Document number of Limited Liability Company is: L08000038392

Date of dissolution was: 9/25/14

Description of information that must be included in a written claim:

Angelique Serra, Esq. will  
wind up all affairs of LLC.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

LAW Office of Angelique Serra, P.A.  
12150 SW 128<sup>th</sup> Ct. Ste. 209  
MIAMI, FL. 33186-4667  
786-429-1260

FILED  
2014 SEP 25 AM 10:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Angelique Serra.

Printed Name of the Person Filing



Signature of the Person Filing