108000110503

(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:
A. LUNT FEB 14 2011
EXAMINER

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200215740312

01/03/12--01029--014 **35.00



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

January 5, 2012

YSAIAS CHAVEZ 720 S. FEDERAL HIGHWAY 43 AVE. HALLANDALE, FL 33009

SUBJECT: V & F SOLUTIONS, LLC

Ref. Number: L08000110503

We have received your document for V & F SOLUTIONS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 712A00000276

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: V & F SOLUT (Name of Limited)	Liability Company)
The enclosed member, managing member or ma	nager resignation and fee(s) are submitted for
filing.	7A 20
Please return all correspondence concerning this	MIZFEB 13 MM:44 SO
YSAIDS CHAVEZ (Contact Person)	ASSE
(Contact Person)	
V&F Columniant, LLC	SAITE STAITE
(Firm/Company)	<i>₽</i>
720 S. Fearal Highway	1 43 are
Hallaudule FL 330 (City/State and Zip Code)	09
(City/State and Zip Code)	
For further information concerning this matter, p	
YSAIRS CHAVES.	754 423.2907
YSAIAS CHAYE2 at (Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	
	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations P.O. Box 6327
Clifton Building 2661 Executive Center Circle	P.O. BOX 0327 Tallahassee Florida 32314

Tallahassee, Florida 32301

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

1. The name of the li	mited liability company as it ap	pears on the records o	of the Florid			
2. This limited liabili	ty company was organized und	er the laws of:		FSTATE	88 st 198	
3. The Florida docun	nent/registration number of this	limited liability comp	oany is:			
4. I, <u>CESAR</u> (Print Nan	QUINONEZ ne of Person Resigning)	, hereby resign as a _	MANA (Print	GE M	<u>IEMB</u>	ER
of this limited liabil resignation in writi	lity company and affirm the lim	ited liability company	/ has been n	otified o	of my	
S	lengt					
Signature of Resign	ning Member, Managing Memb	er or Manager				
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)					