

L11 000 104674

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

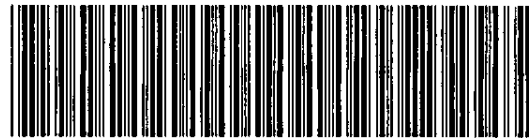
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2014 MAY -9 PM 1:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Verarte 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:

Gina V Tinajero
(Name of Person)

(Firm/Company)

2101 Brickell Ave # 241
(Address)

Miami - FL 33129
(City/State and Zip Code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Gina V. Tinajero at 305 778-5939
(Name of Person) (Phone Number)

Enclosed is a check for the following amount:

☐ \$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 6027
Tallahassee, FL 32314

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

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

1. The name of a limited liability company is:

Verarte LLC

2. The Articles of Organization were filed on 9/13/11 and assigned

document number: L11000104674

3. The delayed effective date the dissolution if not effective on the date of filing: _____
(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)~~

No Longer in business

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

Gina V Tinajero

400 Alton rd #1904

Miami Beach, FL 33139

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:



Signature

Gina V. Tinajero

Printed Name

FILING FEE: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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