L1200118872

(Re	questor's Name)							
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(Document Number)								
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D. BRUCE



May 2, 2013

MICHEL VEGA 2405 MAGNOLIA DR NORTH MIAMI, FL 33181

SUBJECT: VEZA PROPERTY MANAGEMENT LLC

Ref. Number: L12000118872

We have received your document for VEZA PROPERTY MANAGEMENT LLC and your check(s) totaling \$52.50. 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.

The fee to file your limited liability company document is \$25. Please include an additional \$30 for each certified copy (optional) requested and an additional \$5 for each certificate of status (optional) requested.

There is a balance due of \$7.50.

Please return your document, along with a copy of this letter, within 60 days or syour filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 813A00010638

COVER LETTER

TO: Registration Section Division of Corporations									
SUBJECT: DISSOLUTION OF VERT PROPERTY MANAGEMENT, UZ (Name of Limited Liability Company) DOC ## L1200017 8872									
(Name of Limited Liability Company)									
DOC # L12000128072									
The enclosed Articles of Dissolution and fee(s) are submitted for filing.									
Please return all correspondence concerning this matter to the following:									
MICHEL VEGA (Name of Person)									
(Name of Person)									
VEZA PROPERTY MANNIGEMENT, UZ (Firm/Company)									
(Firm/Company)									
2408 MAGNOLIA DR	, a								
(Address)									
AYOS MAGNOLIA DR (Address) NONTH MIAMI FL 33181 (City/State and Zip Code)									
(City/State and Zip Code)	3 1								
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For further information concerning this matter, please call:	٥								
MICHEL VEGA 305, 938-2010									
(Name of Person) (Area Code & Daytime Telephone Number)									
Enclosed is a check for the following amount:									
ρ \$25.00 Filing Fee & ρ \$30.00 Filing Fee & ρ \$55.00 Filing Fee &	١								
Certificate of Status Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed))								
MAILING ADDRESS: STREET/COURIER ADDRESS:									
Registration Section Registration Section									
Division of Corporations Division of Corporations	·								

P.O. Box 6327

Tallahassee, FL 32314

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The nam	e of a limited	liabili الم	ity company	is 14	MA	NAG	EME	757	U	_2_	·
2. T		es of Organi 00011 8			n				•	ک _{assig}	ned doc	ument number
3. T	he date tl	he dissolutio	n was a	approved: _		APR	IL	10	2013	3		
4. A 6	descript 08.441, F	ion of occur Florida Statut 30TH	tes, (co	nat resulted py 608.441 KINER	on ba	ack cover	liability letter). Tu m		••	lution p	ursuant	to section
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