

13000064500

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Document Number)

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TALLAHASSEE FLORIDA

MAY 17 2018  
J. HARRIS

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** V.I.P. Drinks Distribution LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Uwe Rusch

Name of Person

V.I.P. Drinks Distribution LLC

Firm/Company

2624 SW 4th. Ave.

## Address

Cape Coral, FL 33914

City/State and Zip Code

info@vipdrinks.us

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Uwe Rusch

Name of Person \_\_\_\_\_ at (239) \_\_\_\_\_ 8107941  
Area Code Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

## STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Termination:

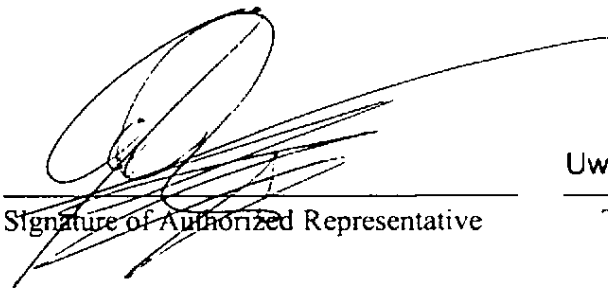
**FIRST:** The name of the limited liability company is: V.I.P. Drinks Distribution LLC

**SECOND:** The Florida Document number of the limited liability company is: L13000064500

**THIRD:** The date of filing of the initial articles of organization is: 05/02/2013

**FOURTH:** The date of filing of the dissolution is: 02/03/2015

**FIFTH:** This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.



Uwe Rusch

Signature of Authorized Representative

Typed or printed name of signature

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)

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2018 MAY 14 PM 2:49  
CLERK OF CIRCUIT  
JUDGE  
TALLAHASSEE FLORIDA