## L15000096671

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#### **COVER LETTER**

SUBJECT:	VIANRO, LLC, a Florida Limited Liability Company						
3(15)(3)(3)	(Name of Limi	iny)					
The enclosed	d Articles of Dissolution and fee(s) are submi	tted for filing.					
Please return	all correspondence concerning this matter to	the following:					
	Jeffrey R. Kuhns, Esq.						
	(Na	me of Person)	•				
	Kuhns Law Firm, PLLC						
	(Firm/Company)						
	425 Cross Street, Ste. #312						
	(Address)						
	Punta Gorda, FL 33950						
	(City/St	ate and Zip Code)					
For further i	nformation concerning this matter, please call	l:					
Jef	frey R. Kuhns, Esq.	941 at (	205-8000				
	(Name of Person)		ode & Daytime Telephone 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)					
	iling Address:	Street Address					
Registration Section Division of Corporations		Registration Division of					
	D. Box 6327	Division of Corporations The Centre of Tallahassee					
Ta	llahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					

Kuhns Law Firm File No: 1111.40

Registration Section Division of Corporations

TO:

### ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

		ARTICLES OF DISSO FOR A LIMITED LIABILITY	LUTION COMPANY	A CALL OF THE OF				
ŀ.	The name of a limited liability	· · · ·		F. C				
2.	The Articles of Organization	were filed on <u>06/02/2015</u>	and assigned					
	document number 1.15000096	671						
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)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.							
	A description of occurrence t 605.0707. Florida Statutes, (coee attached written conse	opy 605.0707 on back cover le		ion				
5.	If there are no members, ente activities and affairs:	r the name and address of the p VINCENT SORRENTI 5400 SW 24TH AVE	person appointed to wind up the company's	;				
		CAPE CORAL, FL 33914		-				
6. ab	Signature of an authorized per love to wind up the company's	rson or if there are no member activities and affairs:	s, the signature of the person appointed and	- I listed				
<u> </u>	wing Suluth	VINC	ENT SORRENTI Printed Name	_				

FILING FEE: \$25.00

# ACTION BY UNANIMOUS WRITTEN CONSENT TO DISSOLVE COMPANY BY THE MEMBERS OF VIANRO, LLC,

a Florida limited liability company

The undersigned, being the Member(s) of VIANRO, LLC, a Florida limited liability company (the "Company"), hereby consent to the adoption of the following resolutions in lieu of an organizational meeting of the Member(s) of the Company:

RESOLVED, that the Company be dissolved and its business affairs wound up in accordance with the provisions of the Florida Revised Limited Liability Company Act, Ch. 605, *Fla. Stat.* effective as of the date set forth in the Company's Articles of Dissolution with the Florida Department of State, Division of Corporations: and it is hereby further

RESOLVED, that the members of this Company are authorized and directed to take such actions and to make, execute, deliver and file on behalf of this Company, any and all documents as may be necessary or desirable to wind up and dissolve the Company; and it is hereby further

RESOLVED, that this Unanimous Written Consent may be executed in several counterparts, each of which shall constitute an original but all of which taken together shall constitute one and the same instrument.

Approved as of MAy 20 . 202c.

MEMBERS:

Kuhns Law Firm File No: 1111.40

### Notice of Limited Liability Company Dissolution

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(pursuant to	- 8	$\Delta H = 1$	$O \cap$	1)	F (1
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above space reserved for Department of State

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 § 605.0712. F.S.

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

- 1. The name and address of the claimant and the name and address of the claimant's attorney, if any:
- 2. The amount of the purported claim (the "claim"):
- 3. A description of the basis of the claim, including supporting documentation such as a contract, bill, or invoice that would sufficiently demonstrate the enforceability of claim against the above named Limited Liability Company.
- 4. The name and address of any other persons or entities who may be an obligee to the claim;
- 5. If the claim is contingent or unliquidated, a description of the nature of the uncertainty;
- 6. If the claim is secured, a description of the secured property; and
- 7. If the Claimant is a successor in interest (e.g., heirs, legal representatives, successors, and assigns), documentation demonstrating a legal interest to enforce the claim on behalf of the original claimant.

The mailing address where claims must be sent (via USPS Certified Mail/Return Receipt Requested or other nationally recognized overnight courier service, signature receipt required):

original copy to: VINCENT SORRENTI 5400 SW 24TH AVE CAPE CORAL, FL 33914 with copy to: Kuhns Law Firm, PLLC 425 Cross Street, Ste. #312

Punta Gorda, FL 33950

<u>NOTE</u>: 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.

Signature to Officer, Director or Manager
Printed Name: VINCENT SORRENTI

Dated: MAY

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