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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-0821 : (850)558-1515 Fax Number

## LLC DISSOLUTION OR WITHDRAWAL **VETOGY, LLC**

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 02      |
| Estimated Charge      | \$25.00 |

Electronic Filing Menu — Corporate Filing Menu

Help

0

## COVER LETTER FO: Registration Section Division of Corporations Vetogy, LLC SUBJECT: (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: Sankesh Abbhi (Name of Person) (Firm/Company) 3119 Ponce de Leon Blvd, Unit C (Address) Coral Gables, FL 33134 (City/State and Zip Code) For further information concerning this matter, please call: Carolina Lezama 219-1053

(Name of Person) (Area Code & 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)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| The name of a limited lia     Vetogy, LLC                                      | bility company is  |   | ······································ |
|--|--|---|--|
| 2. The Articles of Organizat   | ion were filed on August 2, 2016   | and assigned                            |  |
| document number L1600  | 0144048  |   |  |
| Note: If the date inserted i   | e the dissolution if not effective on the ve date cannot be prior to or more than 90 denthis block does not meet the applicable ective date on the Department of State's | ys later than date document is received | for filing)<br>late will not be        |
| <ol> <li>A description of occurren<br/>605.0707, Florida Statutes</li> </ol>   | ce that resulted in the limited liability<br>(copy 605.0707 on back cover lette  | y company's dissolution pursuan',       | t taggettion                           |
|  |  | .:                                      | <u></u>                                |
|  |  | (A.)                                    |  |
| ceased activity  |  | 1772                                    | <del>1</del> 5                         |
| <ol> <li>If there are no members, e<br/>activities and affairs:</li> </ol>     | nter the name and address of the pers  | son appointed to wind up the con        | npany's                                |
|  | 3119 Ponce de Leon Blvd. Unit C  | 2                                       |  |
|  | Coral Gables, FL 33134   |   |  |
| <ol> <li>Signature of an authorized<br/>above to wind up the compan</li> </ol> | person or if there are no members, the sactivities and affairs:  | he signature of the person appoin       | uted and listed                        |
| Sout al  | / Sankesh  |   |  |
| Signature  |  | Printed Name                            |  |

FILING FEE: \$25.00