217000130678

(Re	equestor's Name)			
(Address)				
(Address)				
(Ci	ity/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				
				





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COVER LETTER

Division of Corporations	
VVSN Property & Management SUBJECT:	, LLC
	Limited Liability Company)
The enclosed member, resignation or dis-	sociation and fee(s) are submitted for filing.
Please return all correspondence concern	ning this matter to:
Steven Napier	
(Contact Person)	
VVSN Property & Management, LLC	
(Firm/Company)	
7016 Edgemere Terrace	
(Address)	
Palm Beach Gardens, FL 33410	
(City/State and Zip Code)	
For further information concerning this n	natter, please call:
Aida Veronica Vidal	561 305-0041
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payab	ble to the Florida Department of State for:
13 \$25 Filing Fee	■ \$55 Filing Fee & Certified Copy
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations
Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

TO: Registration Section



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

	limited liability company as i N Property & Management, LLC	t appears on the records of the Florida Department
2. The Florida docu	ument/registration number ass	igned to this limited liability company is:
3. The date this me	mber/manager withdrew/resig	gned or will withdraw/resign is: June 1, 2020
4. I, Aida Veronica Vidal (Print Name of Person Resigning)		
Member	, , , ,	
	(Print Title)	
of this limited lia resignation in wa		limited liability company has been notified of my
Signature of Di	ssociating Member or Resign	ing Manager
	\$25.00 (Required) \$30.00 (Optional)	