

120 000-290237 -

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

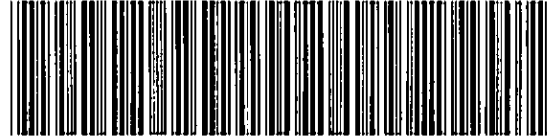
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800370882368

08/02/21--01025--010 **25.00

FILED

2021 AUG -2 AM 7:37

SECRETARY OF STATE
TALLAHASSEE, FL

AUG 11 2021

C. K. HILL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WVERDANT LLC

(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:

GARBINI, CLAUDIO ADRIAN

(Name of Person)

WVERDANT LLC

(Firm/Company)

1039 BLUEWOOD TERRACE

(Address)

WESTON, FL 33327

(City/State and Zip Code)

For further information concerning this matter, please call:

GARBINI, CLAUDIO ADRIAN

(Name of Person)

305

at ()

749-0999

(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/COURIER ADDRESS:

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

MONEY ORDER # 2500
#27371187303