

	Requestor's Name)			
(,	Address)			
(/	Address)			
	City/State/Zip/Phone #)			
(1	Dity/State/Zip/Pflofie #)			
PICK-UP	☐ WAIT ☐ MAIL			
(8	Business Entity Name)			
(Document Number)				
,	,			
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				
PANE				
J. HO' 5 2024				
J. HORNE APR 25 2024				





04/15/24--01002--006 **25.00



COVER LETTER

TO:

Registration Section Division of Corporations

Vpr Services Holdings LLC					
SUBJECT: (Name of Limited Liability Company)					
The enclosed	Articles of Dissolution and fee(s) are submi	tted for filing.			
Please return	all correspondence concerning this matter to	the following:			
	Violeta Larroque				
	(Na	me of Person)			
	Vpr Services Holdings LLC				
	(Firm/Company)				
	13364 NW 2 TERRACE				
		(Address)	 		
	MIAMI, FL 33182				
	(City/S)	ate and Zip Code)	·		
For further in	formation concerning this matter, please cal	l:			
Viol	eta Larroque	786 at (488-2251		
	(Name of Person)	(Area Co	de & Daytime Telephone Number)		
Enclosed is a cl	heck 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)			
	ing Address:	Street Address:			
_	istration Section ision of Corporations	Registration Section Division of Corporations			
	. Box 6327	The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is VPR SERVICES HOLDINGS LLC 2. The Articles of Organization were filed on O9/18/2023 and assigned document number 1.23000432047 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. 4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707. Florida Statutes, (copy 605.0707 on back cover letter). Thave decided to pursue other career opportunities that require my full attention, leaving me anable to continue operating this business. 5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Violeta Larroque 13364 NW 2 TERRACE MIAMI, FL 33182 6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs: Violeta Larroque		FOR A LIMITED LIABILITY COMPANY	FILE
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FILING FEE: \$25.00