

P180000 43549

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

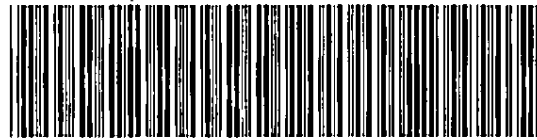
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01/13/20--01013--007 \*\*25.00

03/10/20--01010--001 \*\*10.00

2020 MAY -6 PM 2:42

C. GOLDEN

MAY -5 2020

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** VJ103, INC \_\_\_\_\_

**DOCUMENT NUMBER:** P18000043549 \_\_\_\_\_

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

VAULT JOHNSON

\_\_\_\_\_  
(Name of Contact Person)

\_\_\_\_\_  
(Firm/Company)

12081 ARIANA ELYSE DR.

\_\_\_\_\_  
(Address)

JACKSONVILLE, FL 32258

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

VAULT JOHNSON

\_\_\_\_\_  
(Name of Contact Person)

at ( 904- 707-1776  
\_\_\_\_\_  
(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>enclosed) |
|--|--|---|---|

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

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



2020 MAY -4 PM 12:28

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 12, 2020

VAULT JOHNSON  
12081 ARIANA ELYSE DRIVE  
JACKSONVILLE, FL 32258

SUBJECT: VJ103, INC  
Ref. Number: P18000043549

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to make the correction(s) requested in our previous letter.

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

You submitted the wrong form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden  
Regulatory Specialist II

Letter Number: 920A00005508



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 8, 2020

VAULT JOHNSON  
12081 ARIANA ELYSE DRIVE  
JACKSONVILLE, FL 32258

SUBJECT: VJ103, INC  
Ref. Number: P18000043549

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$10.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden  
Regulatory Specialist II

Letter Number: 520A00002868

FIVE  
2020 FEB 13 3:12 PM

## ARTICLES OF DISSOLUTION

2020-12-31 P11 2:42

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

VJ103, INC

SECOND: The document number of the corporation (if known): P18000043549

THIRD: The date dissolution was authorized: 12/31/2019

Effective date of dissolution if applicable: \_\_\_\_\_

(no more than 90 days after dissolution file date)

**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.

FOURTH: Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.

Signature: \_\_\_\_\_

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

VAULT JOHNSON

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35