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SECRETARY OF STATE

J. BRYAN

MAY -4 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: TIPIDITY LLC. (Name of Limited Liability Company)
(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: OLGA SAUTIOI (Name of Person)
OLGA SANTINI PER P
LIF COEPOBATE SERVICES (Firm/Company)
999 PODCE DE LEON BLUD. # 1135 (Address)
COPAL GABIES, TOPIDA. 33134 (City/State and Zip Code)
For further information concerning this matter, please call:
Olga-Sautini at (305) 856-6121 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$\sum_{\text{S55.00 Filing Fee}} \text{\$\sum_{\text{S55.00 Filing Fee}} & \text{\$\sum_{\text{S60.00 Filing Fee}} & \text{\$\sum_{\text{Certified Copy}} & \text{\$\text{Certified Copy} & \$\text{
MAILING ADDRESS: STREET/COURIER ADDRESS:

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

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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

Nity U.C. Sign 3.
2, 9005 and assigned document number
2009 ty company's dissolution pursuant to section
).
282
bility company have been paid or discharged. igations and liabilities pursuant to s. 608.4421. Ing its members in accordance with their respective in accordance with the accordance wit
ship interests necessary to approve the dissolution:
Printed Name FREUAUSO L FUTO ¥
ty). — C — b ig u

FILING FEE: \$25.00