

L060000063680

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

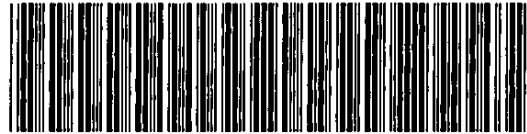
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000099775470

2007 MAY -3 A 9:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

05/03/07--01054--002 \*\*25.00

A

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: RETAIL THERAPY 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:

Melissa McInnis

(Name of Person)

RETAIL THERAPY, LLC

(Firm/Company)

3027 W. Bay Villa Avenue

(Address)

Tampa, Florida 33629

(City/State and Zip Code)

2001 MAY -3 A 9:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

this is the  
address the  
company was  
formed under.

For further information concerning this matter, please call:

Melissa McInnis

(Name of Person)

at (813) 629-1381

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ 30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
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

\* I have moved: (new mailing address)  
848 Amster dam Ave NE  
Atlanta GA 30321

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Retail Therapy, LLC

2. The Articles of Organization were filed on June 23, 2006 and assigned document number

L06000063680

3. The date the dissolution was approved: \_\_\_\_\_

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes. (conv 608.441 on back cover letter).

(b) upon the occurrence of events specified in the  
articles of organization or operating agreement.

5. CHECK ONE:

☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.

-OR-

☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.442.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

☒ There are no suits pending against the company in any court.

-OR-

☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

FILED  
JUN 23 9 40 AM  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

Melissa McInnis  
Heather Taylor

Melissa McInnis  
HEATHER Taylor