

L 1 0 0 0 0 1 1 2 5 2 8

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

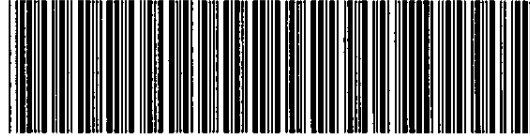
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



200268409082

01/20/15--01010--008 \*\*25.00

FILED  
15 JAN 20 AM 7:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers JAN 30 2015

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Steves Frozen Chillers of North Carolina, Charlotte, 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:

Sherri Freudiger

(Name of Person)

Sherri L Freudiger CPA PA

(Firm/Company)

211 Prather Park Drive, Ste A

(Address)

Myrtle Beach, SC 29588

(City/State and Zip Code)

For further information concerning this matter, please call:

Sherri Freudiger

(Name of Person)

843

903-2727

at (

) (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

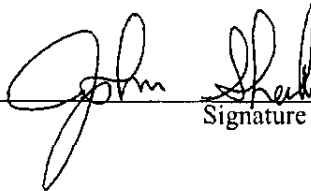
**STREET/COURIER ADDRESS:**

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

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

1. The name of a limited liability company is  
Steves Frozen Chillers of North Carolina, Charlotte, LLC
2. The Articles of Organization were filed on October 27, 2010 and assigned  
document number L10000112528
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)
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).  
Business is not profitable  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
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:

FILED  
15 JAN 20 AM 7:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

  
\_\_\_\_\_  
Signature

John Shevchik

Printed Name

**FILING FEE: \$25.00**