

L13 00000 8856

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

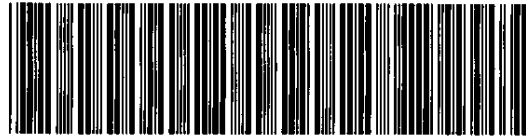
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300260360503

05/23/14--01013--013 **55.00

FILED
14 MAY 23 AM 10:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Stir It Up 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:

Russell H. Steen
(Name of Person)

(Firm/Company)

490 Ridge Blvd. Deland, FL 32724
(Address)

Deland, FL 32724
(City/State and Zip Code)

For further information concerning this matter, please call:

Russell Steen at (_____) ninjahammus@gmail.com
(Name of Person) (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

Stir It Up LLC

2. The Articles of Organization were filed on 1/17/13 and assigned

document number L130000004856

3. The delayed effective date the dissolution is 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 closed due to loss of capital.

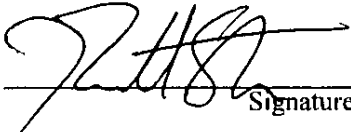
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Russell Steen

490 Ridge Blvd.

DeLand, FL 32724

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:


Signature

Russell Steen
Printed Name

FILING FEE: \$25.00

FILED
TALLAHASSEE, FLORIDA
14 MAY 23 2013