

L13000100347

(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



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04/10/14--01017--008 **25.00

B. BOSTICK

APR 29 2014

EXAMINER

2014 APR 29 19

01017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: UPLOAD YOUR RECIPES, 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:

Barry E. Haimo, Esq.

(Name of Person)

Haimo Law

(Firm/Company)

3020 NE 44th Street

(Address)

Ft. Lauderdale, FL

(City/State and Zip Code)

For further information concerning this matter, please call:

Barry E. Haimo, Esq.

(Name of Person)

954

599-7483

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
UPLOAD YOUR RECIPES, LLC

2. The Articles of Organization were filed on 7/16/13 and assigned
document number L13000100347

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).

Restructuring of business.

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

1803 Adventure place

North Lauderdale, Fl. 33068

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:

Barry E. Haimo, Counsel
Signature

Barry E. Haimo, Esq., Counsel
Printed Name

FILING FEE: \$25.00

2014 JUL 25 5:19

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 14, 2014

BARRY E. HAIMO, ESQ.
HAIMO LAW
3020 NE 44TH STREET
FT. LAUDERDALE, FL 33068

SUBJECT: UPLOAD YOUR RECIPES, LLC
Ref. Number: L13000100347

We have received your document for UPLOAD YOUR RECIPES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

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) 245-6051.

Barbara Bostick
Regulatory Specialist II

Letter Number: 614A00007936

2014 APR 25 P 3 19

2014 APR 25