

L14000 105022

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

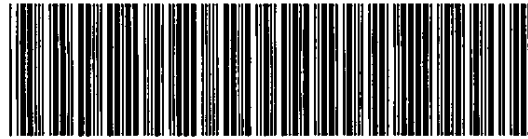
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/07/18--01015--012 **25.00

2018 MAY -7 AM 9:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Stillwell Family Trucking 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:

Deborah Stillwell
(Name of Person)

Stillwell Family Trucking LLC
(Firm/Company)

5045 SE Channel DR
(Address)

Stuart Florida 34997
(City/State and Zip Code)

For further information concerning this matter, please call:

Deborah Stillwell at (772) 418-0633
(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

Stillwell Family Trucking LLC

2. The Articles of Organization were filed on 7/1/2014 and assigned

document number L14000165022

3. The delayed effective date the dissolution if not effective on the date of filing: closed 9/8/2017
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

Death of father - driver of the semi
on 8/8/2016

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

Deborah Stillwell
5045 SE Channel Dr
Stuart FL 34997

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:

Deborah Stillwell
Signature 5/1/2018

Deborah Stillwell
Printed Name

FILING FEE: \$25.00

2018 MAY -7 AM 9:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: Stillwell Family Trucking

Document number of Limited Liability Company is: L14000105022

Date of dissolution was: 9/8/2017

Description of information that must be included in a written claim:

date & supporting documents

2018 MAY -7 AM 9:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

5045 SE Channel Dr
Stuart FL 34997

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Deborah Stillwell
Printed Name of the Person Filing
5/1/2018

Deborah Stillwell
Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00