## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

## LLC DISSOLUTION OR WITHDRAWAL INTERMIX, LLC

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## **COVER LETTER**

TO: Registration Division of	on Section of Corporations		
SUBJECT: Intern	nix, LLC (Name of Por	eign Limited Liability C	Company)
<b>5</b> 6' 1/1			
Dear Sir or Madam	:		
The enclosed with	Irawal and fee(s) are submitted	for filing.	
Please return all co	rrespondence concerning this	matter to the following:	1
Martha Meliblom			
	(Name of Person)		,
Intermix, LLC			
	(Firm/Company)		•
2 Folsom Street			
	(Address)		•
San Francisco, CA	<b>94</b> 105		
	(City/State and Zip Cod	e)	•
For further informa	ation concerning this matter, p	lease call:	
Martha Mellblom		at (415	427-4586
(	Name of Person)	(Area Code &	Daytime Telephone Number)
STREET	COURIER ADDRESS:	MAILING ADDRESS:	
	on Section	Registration Section	
Clifton B	of Corporations	Division of Corporations P.O. Box 6327	
2661 Exe	cutive Center Circle ee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a che	k for the following amount:		
□ \$25 Filing Fee	☐ \$30 Filing Fee & Certificate of Status	Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Intermix, LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
March 24, 2006
(Date registered with Florida Department of State)
M06000001744
(Florida Document Number)
This limited liability company withdrawing its certificate of authority in this state.
Am Montens
(Signature of authorized representative)
Lisa Mertens, Assistant Secretary
(Typed or printed name of signee)

Filing Fee: \$25.00

SECRETARIO AN 7: 56