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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : TRUST PAY CORPORATION  
Account Number : I20140000092  
Phone : (786) 520-6788  
Fax Number : (754) 300-1545

LLC DISSOLUTION OR WITHDRAWAL  
TONALIDADE LLC

Certificate of Status	0
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J SHIVERS

ARTICLES OF DISSOLUTION  
FOR  
**TONALIDADE LLC**  
(A Florida Limited Liability Company)

**FIRST:** The name of a Limited Liability Company is: **TONALIDADE LLC**

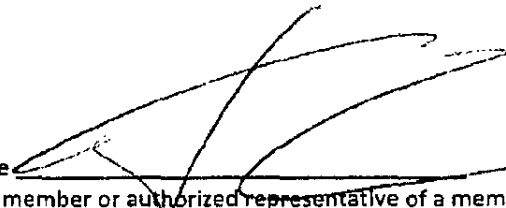
**SECOND:** The Articles of Organization were filed on **10/10/2005** and assigned document number **L05000099521**.

**THIRD:** The effective date of the dissolution: **05/18/2016**.

**FOURTH:** A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes.  
**This Limited Liability Company ceased conducted its business.**

**FIFTH:**

Dated: **May 18, 2016**

Signature   
(By a member or authorized representative of a member)  
**CHARLES GHELFDOND**  
**MANAGER**

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15:27

