

LD 7000025538

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

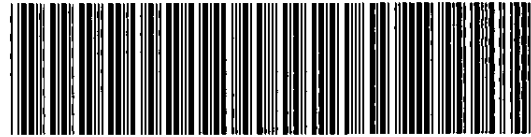
(Business Entity Name)

(Document Number)

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2011 JUN 28 AM 8:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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T. CLINE  
JUN 29 2011  
EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Volume Studios 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:

Gaetan Policard  
(Name of Person)

Volume Studios LLC  
(Firm/Company)

9219 SW 227th St #9  
(Address)

Cutler Bay, FL 33190  
(City/State and Zip Code)

For further information concerning this matter, please call:

Gaetan Policard at ( 305 ) 322-3586  
(Name of Person) (Area Code & Daytime Telephone Number)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 JUN 28 PM 4:30

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Enclosed is a check for the following amount:

\$25.00 Filing Fee

30.00 Filing Fee &  
Certificate of Status

\$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

\$60.00 Filing Fee,  
Certificate of Status &  
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

Volume Studios LLC

2. The Articles of Organization were filed on 03/07/2007 and assigned document number

L070000255.38

3. The date the dissolution was approved: 6-27-11

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

The company ran out of funds and could no longer operate.

5. CHECK ONE:

- All debts, obligations and liabilities of the limited liability company have been paid or discharged.
- OR-
- Adequate provision has been made for the debts, obligations and liabilities pursuant to section 608.441.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

- There are no suits pending against the company in any court.
- OR-
- Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

FILED  
 2011 JUN 28 AM 11:30  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

[Handwritten Signature]  
[Handwritten Signature]  
[Handwritten Signature]  
[Handwritten Signature]

Grietan Policard  
Jeff Policard  
Reginald Policard  
Dominique Policard

Gaetan Policard  
305-322-3586  
gpolicard@gmail.com

Please mail documents to:

9219 SW 227th ST #9  
Cutler Bay, FL 33190