Florida Department of State

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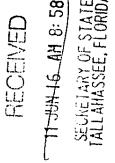
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## DISSOLUTION OR WITHDRAWAL NUEVO MUNDO MUSIC, INC.

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### **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: NUEVO MUNDO MUSIC, INC.		
(Name of Corporation)		
DOCUMENT NUMBER: F99000005961		
The enclosed withdrawal application and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
GABRIELA KORNZWEIG		
(Name of Person)		
NBCUNIVERSAL		
(Firm/Company)		
100 UNIVERSAL CITY PLAZA		
(Address)		
UNIVERSAL CITY, CA 91608		
(City/State and Zip code)		
For further information concerning this matter, please call:		
GABRIELA KORNZWEIG at (818 ) 777-9872		
(Name of Person) (Area Code & Daytime Telephone Number)		

### MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

#### STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN-FLORIDA

NUEVO MUNDO MUSIC, INC.	
(Name of Corp.	oration)
	<b>。</b>
F9900005961	
(Document Number of Cor	
	9.
DELAWARE	15 S S S S S S S S S S S S S S S S S S S
(Incorporated Unde	er Laws or)
This corporation is no longer transacting business or condu- voluntarily surrenders its authority to transact business or co	
This corporation revokes the authority of its registered at appoints the Department of State as its agent for service of time it was authorized to transact business or conduct affairs	process based on a cause of action arising during the
The following is a current mailing address for the corporation	on:
C/O NBCUNIVERSAL, 100 UNIVER	
(Mailing Add	iesa)
UNIVERSAL CITY, CA 91608	
(City/ State /	Zip)
The corporation agrees to notify the Department of State in	the future of any change in its mailing address.
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	6/13/2011 (Date)
receiver or other court appointed fiduciary, by thei fiduciary)	
GABRIELA KORNZWEIG	ASSISTANT SECRETARY

FILING FEE \$35

(Typed or printed name of person signing)