109000119149

(Requestor's Name)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

	istration Section ision of Corporations			
SUBJECT:	musicindustryalternative	com, LLC		
		Limited Liability Company)		
	Articles of Dissolution and fee(s) are su	_		
Please return	all correspondence concerning this mat	ter to the following:		
	John McKenna			
		(Name of Person)		
	musicindustryalternative.com			
	(Firm/Company)			
	1504 bay rd. Suite 1409			
		(Address)		
	miami beach, FL. 33139			
	(Cı	ty/State and Zip Code)		
For further in	nformation concerning this matter, please	e call:		
joł	nn mckenna	at (786) 309-6510		
	(Name of Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a	check for the following amount:			
\$25,00 Filin	ag Fee 30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) \$560.00 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

musicindustryalternative.com, LLC		
2. The Articles of Organization were filed on LO9000119149	nuary 1, 2010	and assigned document number
3. The date the dissolution was approved:	h 23, 2010	 '
4. A description of occurrence that resulted in the 1 608.441, Florida Statutes, (copy 608.441 on back the statutes) for the statutes of the s	imited liability company's k cover letter).	
5. CHECK ONE: ✓ All debts, obligations and liabilities of the Corporation of the Corpor	•	•
6. All remaining property and assets have been dist rights and interests.	_	
7. CHECK ONE:		
 ✓ There are no suits pending against the cooperation of the cooperation of		ment, order or decree which may be
signatures of the members having the same percentage	e of membership interests	necessary to approve the dissolution:
Signature		Printed Name
	_5	sha T. McKenna
		11 TALL
	-	APR -
		SSEE. FLORIII
		OF STATE
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