## L17006075140

·
(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



000256601680

02/18/14--01045--015 \*\*25.00



A SHEWERS FEB 1 9 2014

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Live Loud LLC	
(Name of Limited	Liability Company)
The enclosed Articles of Dissolution and fee(s) are submitted	for filing.
Diagon ration all company and area concerning this matter to the	followings
Please return all correspondence concerning this matter to the	ionownig.
Michelle Cintila	
Michelle Giubilo (Name o	of Person)
Live Loud LLC	
Live Loud LLC (Firm/C	Company)
1141 42 <sup>nd</sup> Ave 1	0F
(Add	dress)
	00-10
St. Potersburg (City/State a	L 33703
(City/State a	and Zip Code)
For further information concerning this matter, please call:	
Michelle Gindila	at (609 ) 432-5030
Michelle Giubilo (Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$25.00 Filing Fee and Certificate of Dissolution	\$55.00 Filing Fee, Certificate of Dissolution &
\$25.00 I mig 1 of the Continue of Dissolution	Certified Copy (additional copy is enclosed)
MAILING ADDRESS:	STREET/COURIER ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
	Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. 7	The name of a limited liability company is			
-	Live Loud LLC			_·
	The Articles of Organization were filed on Mry 22°, 26 document number EIN 38-3910483	and assigne	ed	
3. 1	The delayed effective date the dissolution if not effective on the delayed	ate of filing:		
4. <i>A</i>	A description of occurrence that resulted in the limited liability co 05.0707, Florida Statutes, (copy 605.0707 on back cover letter).	mpany's dissolution pu	suant to sec	ction
_	My business partner drained the business	account withou	w Ku	Knowing
	So I removed him from the business. I	Abwar, I wu	<u>noz</u>	
	able to keep the busines going. The cor	nound has not	bun in	<u> </u>
_	elled since Ochober, 2013.			
5. I	If there are no members, enter the name and address of the person	appointed to wind up th	e company	's
a	activities and affairs:			<u></u>
				_
				_
				_
6. S	Signature of an authorized person or if there are no members, the seve to wind up the company's activities and affairs:	signature of the person a	ppointed ar	- nd listed
	Signature	Printed Name		
m	Michell Michell	e Giubilo		
	FILING FEE: \$25.00			
				• · · · · · · · · · · · · · · · · · · ·