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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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COVER LETTER

	sion of Corporations		
COLUMN ARY CUTS	GAMBY MUSIC LLC.		
NUMBET: _	(Name of Limi	ted Liability Company)	
The enclosed a	Articles of Dissolution and fee(s) are submit	tted for filing.	
Please return a	all correspondence concerning this matter to	the following:	
	VICTOR GAMBARDELLA		
	(Nai	me of Person)	
	GAMBY MUSIC LLC		
	(Firm/Company)		
	6717 CARLYLE LANE		
		(Address)	
	SARASOTA FLORIDA, 34243		
	(City/St	nte and Zip Code)	
For further inf	ormation concerning this matter, please call	:	
VICTOR GAMBARDELLA		941-374-082	
<u></u>	(Name of Person)	at () (Area Code & Daytime Telephone Number)	
Enclosed is a ch	eck for the following amount:		
■ \$25.00 Filing Fee and Certificate of Dissolution		☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)	
	ng Address:	Street Address:	
Registration Section Division of Corporations		Registration Section Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited lie GAMBY MUSIC LLC	ability company is	·
2. The Articles of Organiza	tion were filed on	and assigned
document number 1.1900	0199068	
Nate: If the date inserted	te the dissolution if not effective on the date a tive date cannot be prior to or more than 90 days later to in this block does not meet the applicable statutor ffective date on the Department of State's records	ry filing requirements, this date will not be
4. A description of occurre 605.0707, Florida Statute CHANGING BUSINESS F	nce that resulted in the limited liability compass, (copy 605.0707 on back cover letter).	any's dissolution pursuant to section
CHANGING BUSINESS P	.,	
5. If there are no members, activities and affairs:	enter the name and address of the person app VICTOR GAMBARDELLA	nointed to wind up the company's
activities and arrains.	6717 CARLYLE LANE	2021 A
	SARASOTA FL,34243	PPR 19
		PH 2
6. Signature of an authorize above to wind up the compa	d person or if there are no members, the sign my's activities and affairs:	ature of the person appointed and listed
MA	VICTOR GAME	BARDELLA
Signature		Printed Name

FILING FEE: \$25.00