## N110000087100

| (Re                                     | questor's Name)    |             |
|-----------------------------------------|--------------------|-------------|
| (Address)                               |                    |             |
| (Ad                                     | ldress)            |             |
| (Cit                                    | ty/State/Zip/Phone | e #)        |
| PICK-UP                                 | ☐ WAIT             | MAIL        |
| (Business Entity Name)                  |                    |             |
| (Document Number)                       |                    |             |
| Certified Copies                        | Certificates       | s of Status |
| Special Instructions to Filing Officer: |                    |             |
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## **COVER LETTER**

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| <b>TO:</b> Amendment Section Division of Corporations                                           |                                                                                                                                                                                               |
|-------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| SUBJECT: Overtown Music Project, Inc.                                                           |                                                                                                                                                                                               |
| DOCUMENT NUMBER: N11000008766                                                                   |                                                                                                                                                                                               |
| The enclosed Articles of Dissolution and fe                                                     | e are submitted for filing.                                                                                                                                                                   |
| Please return all correspondence concerning                                                     | this matter to the following:                                                                                                                                                                 |
| Mark Alhadeff                                                                                   |                                                                                                                                                                                               |
| (Name o Alhadeff Law Group, P.L.                                                                | f Contact Person)                                                                                                                                                                             |
| (Fire                                                                                           | m/Company)                                                                                                                                                                                    |
| 11900 Biscayne Blvd., Ste 289                                                                   |                                                                                                                                                                                               |
| North Miami, GL 33181                                                                           | Address)                                                                                                                                                                                      |
| (City/Stat                                                                                      | te and Zip Code)                                                                                                                                                                              |
| For further information concerning this matter                                                  | er, please call:                                                                                                                                                                              |
| Mark Alhadeff                                                                                   | 786 618-9703                                                                                                                                                                                  |
| (Name of Contact Person)                                                                        | at ()(Area Code) (Daytime Telephone Number)                                                                                                                                                   |
| Enclosed is a check for the following amoun                                                     | ıt:                                                                                                                                                                                           |
| ■ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Statu                                   | \$\frac{1}{2} \Pi \\$43.75 \text{ Filing Fee & } \Pi \\$52.50 \text{ Filing Fee, } \\ \text{Certified Copy (Additional copy is enclosed)} \text{Certified Copy (Additional copy is enclosed)} |
| 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

## ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution: FIRST: The name of the corporation as currently filed with the Florida Department of State: Overtown Music Project, Inc. The document number of the corporation (if known):\_\_\_\_\_N11000008766 SECOND: THIRD: Adoption of Dissolution (COMPLETE SECTION I OR II) SECTION I If the corporation has members entitled to vote: (CHECK/COMPLETE ONE) ☐ The date of meeting of members at which the resolution to dissolve was adopted . The number of votes cast by the members was sufficient for approval. The resolution was adopted by written consent of the members and executed in accordance with section 617.0701, Florida Statutes. SECTION II If the corporation has no members or members entitled to vote on the dissolution: The corporation has no members or members entitled to vote on the dissolution. The date of adoption of the resolution by the board of directors was \_\_\_\_ The number of directors in office was \_\_\_\_\_ and the vote for resolution was \_\_\_\_\_ for and against. (Must be a majority vote) Effective date of dissolution, <u>if applicable</u>: September 1, 2015 FOURTH (no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Signature: (By the chairman or five chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary) Amy Rosenberg

Filing Fee: \$35

(Title of person signing)

(Typed or printed name of person signing)

President/Director