## **Transmittal Letter**

December 12, 2001

Department of State Division Of Corporations P.O. Box 6327 Tallahassee, FL 32314 100004733971---7 -12/20/01--01028--004 \*\*\*\*\*\*87.50 \*\*\*\*\*\*87.50

SUBJECT: Musicalynx, Inc.

12-15-01

Enclosed is an original and two (2) copies of the articles of incorporation and a check for: \$87.50.

FROM:

Musicalynx, Inc.
C/O Mr. Rosito Abellera
1043 South 14<sup>th</sup> Court
Lantana, FL 33462

TALLAHASSEE, FLORID

## <u>ARTICLES OF INCORPORATION</u> <u>of</u> <u>Musicalynx, Inc.</u>

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

12-15-0J

Musicalynx, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

Musicalynx, Inc. C/O Mr. Rosito Abellera 1043 South 14<sup>th</sup> Court Lantana, FL 33462

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100,000 Shares

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Name:

Mr. Rosito Abellera

Address:

Musicalynx, Inc.

1043 South 14<sup>th</sup> Court Lantana. FL 33462 SECRETARY OF STATE

Musicalynx, Inc. Articles of Incorporation Page 2 of 3

## **ARTICLE V INCORPORATOR**

The name and address of the incorporator to these Articles of Incorporation are:

Name: Address: Mr. Ross Raiden Musicalynx, Inc.

1043 South 14<sup>th</sup> Court Lantana, FL 33462

Śignatúre/Incorporator

Date

**ARTICLE VI EFFECTIVE DATE OF INCORPORATION** 

The effective date of incorporation of Musicalynx, Inc. shall be December 15, 2001.

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## Registered Agent Acceptance <u>for</u> <u>Musicalynx, Inc.</u>

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature/Registered Agent

2-13-0

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA