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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

SUBJECT: CITY SOUND USA, INC.	
DOCUMENT NUMBER: P02000050669	
The enclosed Articles of Dissolution and fee are submitted	ted for filing.
Please return all correspondence concerning this matter t	o the following:
Donia A. Roberts, Esq.	
(Name of Contact Perso	
Donia A. Roberts, P.A.	
(Firm/Company)	
1100 North Main Street, Sui	te C
(Address)	
Belle Glade, FLorida 33430 (City/State and Zip Cod	e)
For further information concerning this matter, please ca	11:
Luz Torres (Legal Assistant at (561) 993-0990
(Name of Contact Person) (A	Area Code & DaytimeTelephone Number)
Enclosed is a check for the following amount:	
	ed Copy Certificate of Status & Certified Copy
MAILING ADDRESS:	STREET ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO: Amendment Section

Division of Corporations

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the of dissolution: FIRST: The name of the corporation as currently filed with the Florida Department of State: CITY SOUND USA, INC. SECOND: The document number of the corporation (if known): P04000057103 THIRD: The date dissolution was authorized: MARCH 30, 2007 Effective date of dissolution if applicable: May 1st. (no more than 90 days after dissolution file date) FOURTH: Adoption of Dissolution (CHECK ONE) Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval. Dissolution was approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve: The number of votes cast for dissolution was sufficient for approval by (voting group) Signature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary) GASSAB HALUM (Typed or printed name of person signing)

Filing Fee: \$35

(Title of person signing)

DIRECTOR

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S. This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. Name of Corporation: CITY SOUND USA, INC. Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) Donia A. Roberts, P.A. 1100 N. Main Street, Suite C Belle Glade, Florida 33430_____ A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice. GASSAB HALUM Printed Name of the Person Filing Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00