

P940000351951

MUSICAL TRADITIONS, INC.

P.O. BOX 807-T
860 WINSTED, CT 06098
203-379-6866 FAX: 203-379-7685
840

Enclosed is form 607-1403
Articles of Dissolution for the
above corp. If you have any
questions please contact me
@ 860-379-6866

MELISSA MARKS

Office Use Only

own):

Copy

of Status

97 APR 11 PM 3:56

SECRET
DIVISION

I had you

<input type="checkbox"/> NonProfit	<input type="checkbox"/> Resignation of R.A., Officer/ Director
<input type="checkbox"/> Limited Liability	<input type="checkbox"/> Change of Registered Agent
<input type="checkbox"/> Domestication	<input checked="" type="checkbox"/> Dissolution/Withdrawal
<input type="checkbox"/> Other	<input type="checkbox"/> Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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-04/11/97--01068--001
*****37.50 *****07.50
27.50 27.50

EFFECTIVE DATE
4-22-97

7LL APR 15 1997A

ARTICLES OF DISSOLUTION

FILED
SECRETARY OF STATE
DIVISION OF CORPORATE REGISTRATION
97 APR 11 PM 3:56

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

EFFECTIVE DATE
4-20-97

FIRST: The name of the corporation is: Musical Traditions, Inc.

SECOND: The date dissolution was authorized: April 1, 1997 effective date April 20, 1997.

THIRD: 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 vote of 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)

Signed this _____ day of _____, 19 _____.

Signature

Melissa Marks

(By the Chairman or Vice Chairman of the Board, President, or other officer)

Melissa Marks

(Typed or printed name)

President

(Title)