



Form  
**UPA-93**  
(Rev. 08/20)

State Corporation Commission

Commonwealth of Virginia  
State Corporation Commission  
Office of the Clerk  
Entity ID: 11672587  
Filing Number: 2403206992186  
Filing Date/Time: 03/20/2024 10:27 AM  
Effective Date/Time: 03/20/2024 10:27 AM

# Statement of Partnership Authority

The undersigned, on behalf of the partnership set forth below, pursuant to Title 50, Chapter 2.2, Article 3 of the Code of Virginia, state as follows:

1. The name of the partnership is Music Clearance Store.

2. The partnership's SCC ID number (if one has been issued) is \_\_\_\_\_.

3. The partnership is formed under the laws of Virginia  
(state or other jurisdiction)

4. (Mark if applicable:)  The partnership was previously authorized or registered with the Commission to transact business in Virginia as another type of foreign business entity. (See Instructions.)

5. The address, including the street and number, if any, of the partnership's principal office is  
105 S. Main St Galax Va. 24333  
(number/street) (city or town) (state) (zip)

6. The address, including the street and number, if any, of one office of the partnership in Virginia (if any) is  
105 S. Main St Galax VA 24333  
(number/street) (city or town) (zip)

7. (Mark applicable box:)

The names and mailing addresses of all of the partners are:

Name	Address
<u>Steven Ray Barr</u>	<u>105 S. Main St</u> <u>Galax Va. 24333</u>
<u>Rebecca Barr</u>	<u>2691 Gambetta Rd.</u> <u>Galax Va. 24333</u>

OR

The name and mailing address of an agent, who was appointed by the partnership for the purpose of maintaining a list of the names and mailing addresses of all of the partners, are:

Name	Address
_____	_____

8. (Required:) An instrument transferring real property held in the name of the partnership is authorized to be executed by the following partner(s): (The name of at least one partner is required.)

Rebecca Barr \_\_\_\_\_  
(name) (name)

9. (Optional - Mark if applicable:)  The authority, or limitations on the authority, of some or all of the partners to enter into other transactions on behalf of the partnership, or other matters, are set forth in an attachment.

Signatures of partners (must be executed by at least two):

<u>[Signature]</u> (signature)	<u>Rebecca Barr</u> (printed name)	<u>1/24/24</u> (date)
<u>[Signature]</u> (signature)	<u>Steven Ray Barr</u> (printed name)	<u>1/24/24</u> (date)

Telephone number (optional): 276-233-5470