

F24000000244

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

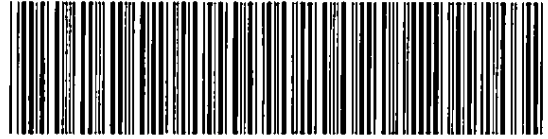
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2024 JAN 17 AM 11:41

2024 JAN 17 PM 3:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CT CORP
(850) 656-4724
3458 lakesore Drive
Tallahassee, FL 32312

Date: 01/17/2024

Acc#I2016000072

eric D.W.

Name:	Loxen Entertainment, Inc.
Document #:	
Order #:	15327514

Certified Copy of Arts & Amend:	<input type="checkbox"/>	
Plain Copy:	<input type="checkbox"/>	
Certificate of Good Standing:	<input type="checkbox"/>	
Certified Copy of	<input type="checkbox"/>	
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:
		Number of Certs:

Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
	Plain: <input type="checkbox"/>
	COGS: <input type="checkbox"/>

Email Address for Annual Report Notifications:

Availability _____
 Document _____
 Examiner _____
 Updater _____
 Verifier _____
 W.P. Verifier _____
 Ref# _____

Amount: \$ **78.75**

Thank you!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Loxen Entertainment, Inc.
Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Andrew Gramet
Name of Person

Holland & Knight
Firm/Company

31 West 52nd Street, 14th Floor
Address

New York, NY 10019
City/State and Zip Code

statereg@hkklaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alexandra Sweeton at (212) 513-3237
Name of Person Area Code Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. Loxen Entertainment, Inc.
(Name of corporation; must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware (State or country under the law of which it is incorporated) 3. 93-3737949 (FEI number, if applicable)

4. 09/21/2023 (Date of Incorporation) 5. (Date of duration, if other than perpetual)

6. (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. c/o Holland & Knight, 701 Brickell Avenue, Suite 3300, Miami, FL 33131 (Principal office street address)

c/o Holland & Knight, 31 West 52nd Street, New York, NY 10019 (Current mailing address, if different)

8. Dedicated to providing performance opportunities for Florida talent and promoting community in the local arts scene. (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation Florida 33324 (City) (Zip Code)



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10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System

By John Flynn Assistant Secretary (Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

Chairman Name: Benjamin Leon IV
 Vice Chairman Address: 31 West 52nd St 14th Fl
 Director New York, NY 10019
 President
 Vice President
 Secretary Treasurer
 Other: Other:

Chairman Name: Alex Duque
 Vice Chairman Address: 31 West 52nd Street 14th Fl
 Director New York, NY 10019
 President
 Vice President
 Secretary Treasurer
 Other: Other:

Chairman Name: Benjamin Leon III
 Vice Chairman Address: 31 West 52nd St 14th Fl
 Director New York, NY 10019
 President
 Vice President
 Secretary Treasurer
 Other: Other:

Chairman Name: Gonzalo Rodriguez
 Vice Chairman Address: 31 West 52nd Street 14th Fl
 Director New York, NY 10019
 President
 Vice President
 Secretary Treasurer
 Other: Other:

Chairman Name: James Kierstead
 Vice Chairman Address: 31 West 52nd St 14th Fl
 Director New York, NY 10019
 President
 Vice President
 Secretary Treasurer
 Other: Other:

Chairman Name: Daniel Hernandez
 Vice Chairman Address: 31 West 52nd St 14th Fl
 Director New York, NY 10019
 President
 Vice President
 Secretary Treasurer
 Other: Other:

NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

13. /s/ Alex Duque
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Alex Duque, Secretary/Treasurer
(Typed or printed name and capacity of person signing application)

Delaware


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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LOXEN ENTERTAINMENT, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SECOND DAY OF NOVEMBER, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.




Jeffrey W. Bullock, Secretary of State

2390533 8300N

SR# 20233882054

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 204508605

Date: 11-02-23