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COVER LETTER

TO: Registration Section
Division of Corporations

FORTE MEDIA SOLUTIONS, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

BRYAN GLAUS						
Name of Person						
DIGITAL MEDIA SOLUTIONS LLC						
Firm/Company						
28100 US HIGHWAY 19 N SUITE 204						
Address						
CLEARWATER FL 33761						
City/State and Zip Code						
bglaus@thedmsgrp.com						
E-mail address: (to be used for future annual report notification)						

For further information concerning this matter, please call:

Bryan Glaus	727	287-0428		
Name of Contact Person	Area Code	Daytime Telephone Number		

MAILING ADDRESS: Division of Corporations

Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS:

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

Enclosed is a check for the following amount:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

J. FORTE MEDIA SOLUTIONS, LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L	L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The all Liability Company, "L.L.C," or "LLC.") 2. DELAWARE 3. 80-0806270	sternate name must include "Limited
(Jurisdiction under the law of which foreign limited liability (FEI number,	if applicable)
company is organized)	
4. 04/06/2015	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	42°4
_{5.} c/o Digital Media Solutions LLC	2015
233 West Route 59 Nanuet NY 10954 (Street Address of Principal Office)	APR T
6. 28100 US Highway 19 N Suite 204	M → M
Clearwater FL 33761	
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authorical Joseph Marinucci Managing Member	ty to manage is/are:
8. Attached is an original certificate of existence, no more than 90 days old, duly having custody of records in the jurisdiction under the law of which it is organize acceptable. If the certificate is in a foreign language, a translation of the certificate must be submitted)	d. (A photocopy is not
Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties am aware that any false information submitted in a document to the Department of State constitutes a third degree felony	
Joseph Marinucci	
Typed or printed name of signee	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

FORTE MEDIA SOLUTIONS, LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Bryan Glaus				
	(Name)		~	
28100 US Hi	ighway 19 N Suite 204		2015	•
Florida Stre	eet Address (P.O. Box NOT ACCEPTABLE)	***	APA	
Clearwater	FL 33761	A CONTRACTOR	-8	
City/State/Zip		77 ext	=:	J
			0	_

Having been named as registered agent and to accept service of process for the above stated limited liability company 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 as provided for in Chapter 605, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FORTE MEDIA SOLUTIONS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRD DAY OF APRIL, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FORTE MEDIA SOLUTIONS, LLC" WAS FORMED ON THE TWELFTH DAY OF APRIL, A.D. 2012.

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

5139176 8300 150464633

AUTHENTYCATION: 2262548

DATE: 04-03-15