#1110000002756

| | (Requestor's Name) |
|----------------------|--------------------------|
| | (Address) |
| · <u> </u> | (Address) |
| | (City/State/Zip/Phone #) |
| PICK-UF | P WAIT MAIL |
| | (Business Entity Name) |
| | (Document Number) |
| Certified Copies | Certificates of Status |
| Special Instructions | to Filing Officer: |
| | |
| | |
| | |

Office Use Only



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05/18/11--01024--009 **155.00



K. SALY EXAMINER - MAY 3 1 2011



May 19, 2011

JULIANNE MILES 4440 PGA BLVD., STE. 600 PALM BEACH GARDENS, FL 33410

SUBJECT: FIGLEY LLC Ref. Number: W11000027701

We have received your document for FIGLEY LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Letter Number: 211A00012463

Karen A Saly Regulatory Specialist II

www.sunbiz.org

COVER LETTER

| TO: Registration Section Division of Corporations | |
|--|---|
| SUBJECT: Figley LLC | |
| | e of Limited Liability Company |
| The enclosed "Application by Foreign Limited Liabil Existence, and check are submitted to register the about | ity Company for Authorization to Transact Business in Florida," Certificate of ove referenced foreign limited liability company to transact business in Florida |
| Please return all correspondence concerning this matt | ter to the following: |
| Julianne Miles | |
| | Name of Person |
| | |
| | Firm/Company |
| 4440 PGA Blvd Suite 60 | 0 |
| | Address |
| Polm Peoch Cardona El | 22410 |
| Palm Beach Gardens, FL | City/State and Zip Code |
| | • |
| <u>jmiles@penningtonven</u> | tures.com be used for future annual report notification) |
| • | • |
| For further information concerning this matter, please | call: |
| Julianne Miles | at (561) 691-0838 |
| Name of Person | Area Code & Daytime Telephone Number |
| | STREET ADDRESS: |
| | Division of Corporations |
| | Registration Section |
| | Clifton Building 2661 Executive Center Circle |
| | Tallahassee, FL 32301 |
| Enclosed is a check for the following amount | ·· |
| \$125.00 Filing Fee \$130.00 Filing Fee | |
| Certificate of Status | Certified Copy of Status & Certified Copy |

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN

| LIMI | TED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: |
|-------|---|
| 1. F | igley LLC |
| | (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") |
| conse | ame unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writter ent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability pany," "L.L.C," "LLC.") |
| 2. D | elaware 3, 45-2217114 |
| (Ju | risdiction under the law of which foreign limited liability (FEI number, if applicable) mpany is organized) |
| 4 | 5/11/2011 5. perpetual |
| - | (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") |
| 6. | 5/13/2011 |
| _ | (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) |
| 7. 4 | 440 PGA Blvd Suite 600 三字 美 平 |
| P | (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 440 PGA Blvd Suite 600 Palm Beach Gardens, FL 33418 (Street Address of Principal Office) Timited liability company is a manager-managed company, check here |
| | (Street Address of Principal Office) |
| 8. If | limited liability company is a manager-managed company, check here |
| 9. T | he name and usual business addresses of the managing members or managers are as follows: |
| ç | Christos Cotsakos 211 Grand Pointe Dr, Palm Beach Gardens FL 33418 |
| 3 | Suzanne Cotsakos 211 Grand Pointe Dr, Palm Beach Gardens, FL 33418 |
| Ĩ | ulianne Miles 211 Grand Pointe Dr, Palm Beach Gardens, FL 33418 |
| theju | attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in risdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a stion of the certificate under oath of the translator must be submitted.) |
| | Nature of business or purposes to be conducted or promoted in Florida: |
| | Digital Media Entertainment |
| | Signature of a member or an authorized representative of a member. |
| | (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the |
| | penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) |
| | Christos Cotsakos |

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| If unavailable, the alternate to be used in the state of Florida is: | | | | |
|--|-------------------------------|-------------------------------------|--|--|
| • · · · · · · · · · · · · · · · · · · · | | | | |
| 2. The name and th | e Florida street address of t | he registered agent and office are: | | |
| CI | ristos Cotsakos | | | |
| | | (Name) | | |
| 444 | 10 PGA Blvd Suite 60 | 00 | | |
| | Florida Street Address | (P.O. Box NOT ACCEPTABLE) | | |
| Pa | im Beach Gardens | _{FL} 33418 | | |
| - | | City/State/Zip | | |

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 608, Florida Statutes.

\$ 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 :

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "FIGLEY 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 TWENTY-SIXTH DAY OF MAY, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FIGLEY LLC"
WAS FORMED ON THE ELEVENTH DAY OF MAY, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

4981074 8300

110629840

AUTHENTICATION: 8790613

DATE: 05-26-11

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