that my name appears above, or on an attachment with all other like empowered. MANAGER

SIGNATURE: DENNIS CUSTAGE

Electronic Signature of Signing Authorized Person(s) Detail

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000013791

Entity Name: WRAP MEDIA GROUP, LLC

Current Principal Place of Business:

TOWN CENTER EXECUTIVE SUITE 5550 GLADES ROAD SUITE 500 BOCA RATON, FL 33431

Current Mailing Address:

TOWN CENTER EXECUTIVE SUITE 5550 GLADES ROAD SUITE 500 BOCA RATON, FL 33431

FEI Number: 80-0681034

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

GREENSPOON MARDER, P.A. 100 W CYPRESS CREEK ROAD SUITE 700 FORT LAUDERDALE, FL 33309 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE:

Authorized Person(s) Detail :

City-State-Zip: BOCA RATON FL 33431

Authorized Ferson(5) Detail .				
	Title	MGR	Title	MGR
	Name	CUSTAGE, DENNIS	Name	BERKE, IRA
	Address	5550 GLADES ROAD SUITE 500	Address	5550 GLADES ROAD SUITE 500
	City-State-Zip:	BOCA RATON FL 33431	City-State-Zip:	BOCA RATON FL 33431
	Title	MGR	Title	MGR
	Name	DECKELBAUM, GORDON	Name	JACKMAN, STEPHEN
	Address	5550 GLADES ROAD SUITE 500	Address	5550 GLADES ROAD SUITE 500
	City-State-Zip:	BOCA RATON FL 33431	City-State-Zip:	BOCA RATON FL 33431
	Title	MGR		
	Name	SCHNEIDER, ROBERT		
	Address	5550 GLADES ROAD SUITE 500		

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and

FILED Apr 23, 2015 Secretary of State CC6392950728

Certificate of Status Desired: No

04/23/2015 Date

Date