

**LO2000005740**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

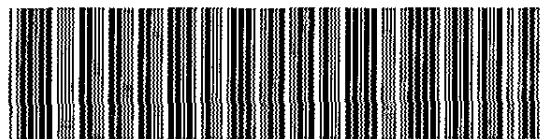
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TALLAHASSEE, FLORIDA



ACCOUNT NO. : 072100000032

REFERENCE : 819034 7258333

AUTHORIZATION :

*Patricia Pizote*

COST LIMIT : \$ 70.00

ORDER DATE : November 13, 2002

ORDER TIME : 9:48 AM

ORDER NO. : 819034-005

CUSTOMER NO: 7258333

CUSTOMER: Mr. Miguel Holling  
Liberty Livewire Corporation  
520 Broadway  
5th Floor  
Santa Monica, CA 90401

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TALLAHASSEE, FLORIDA

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FOREIGN FILINGS

NAME: A.F. ASSOCIATES, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea -- EXT# 1114

EXAMINER: \_\_\_\_\_

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. A.F. Associates, Inc.

(Name of corporation; must include the word "INCORPORATED", "COMPANY", "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.)

2. New Jersey

(State or country under the law of which it is incorporated)

3. 22-1892227

(FEI number, if applicable)

4. July 12, 1968

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 520 Broadway, 5th Floor, Santa Monica, CA 90401

(Principal office address)

520 Broadway, 5th Floor, Santa Monica, CA 90401

(Current mailing address)

8. Post Production

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301

(City)

(Zip code)

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.*

Corporation Service Company

(Registered agent's signature)

Deborah D. Skipper

Deborah D. Skipper  
Asst. V. Pres.

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.

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12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: See attached officers/directors rider

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: See attached officers/directors rider

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. \_\_\_\_\_

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. William E. Niles, Vice President

(Typed or printed name and capacity of person signing application)

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**ATTACHMENT TO**  
**APPLICATION FOR CERTIFICATE OF AUTHORITY OF**  
**A. F. ASSOCIATES, INC.**

12. A. Names and Addresses of Directors:

Robert R. Bennett, Director  
520 Broadway, 5<sup>th</sup> Floor  
Santa Monica, CA 90401

William R. Fitzgerald, Director  
520 Broadway, 5<sup>th</sup> Floor  
Santa Monica, CA 90401

B. Names and Addresses of Officers:

William R. Fitzgerald, President  
520 Broadway, 5<sup>th</sup> Floor  
Santa Monica, CA 90401

George C. Platisa, Vice President and Treasurer  
520 Broadway, 5<sup>th</sup> Floor  
Santa Monica, CA 90401

Gavin W. Schutz, Chief Technology Officer  
520 Broadway, 5<sup>th</sup> Floor  
Santa Monica, CA 90401

William E. Niles, Vice President and Secretary  
520 Broadway, 5<sup>th</sup> Floor  
Santa Monica, CA 90401

Jay Singh, Vice President  
520 Broadway, 5<sup>th</sup> Floor  
Santa Monica, CA 90401

Donna K. Cote, Vice President and Assistant Secretary  
520 Broadway, 5<sup>th</sup> Floor  
Santa Monica, CA 90401

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Gary Blaylock, Vice President and Assistant Secretary  
520 Broadway, 5<sup>th</sup> Floor  
Santa Monica, CA 90401

J. David Fleming, Assistant Vice President and Assistant Secretary  
520 Broadway, 5<sup>th</sup> Floor  
Santa Monica, CA 90401

Patricia Beckley, Assistant Vice President and Assistant Secretary  
520 Broadway, 5<sup>th</sup> Floor  
Santa Monica, CA 90401

Sharon L. Meymarian, Assistant Secretary  
520 Broadway, 5<sup>th</sup> Floor  
Santa Monica, CA 90401

Dustin K. Finer, Assistant Secretary  
520 Broadway, 5<sup>th</sup> Floor  
Santa Monica, CA 90401

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STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

A. F. ASSOCIATES, INC.

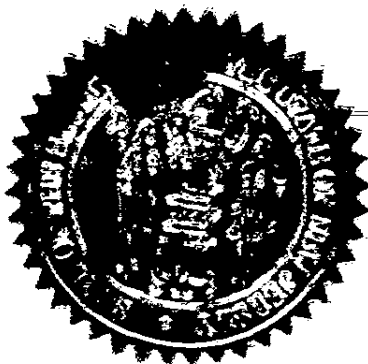
*I, the Treasurer of the State of New Jersey,  
do hereby certify that the above-named  
New Jersey Domestic Profit Corporation was  
registered by this office on July 12, 1968.*

*As of the date of this certificate, said business  
continues as an active business in good standing  
in the State of New Jersey, and its Annual Reports  
are current.*

*I further certify that the registered agent and  
registered office are:*

*Edward L Stenwell  
240 Pegasus Ave  
Northvale, NJ 07647*

IN TESTIMONY WHEREOF, I have  
hereunto set my hand and  
affixed my Official Seal  
at Trenton, this  
14th day of November, 2002



A handwritten signature in cursive script, reading "John E. McCormac".

John E McCormac, CPA  
State Treasurer