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(Requestor's Name)					
· ·	<b>,</b>				
(Ad	ldress)				
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(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
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Office Use Only



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SECRETARY OF STATE
TALLAHASSEE FI DELLA

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#### **COVER LETTER**

TO:	New Filing Section Division of Corporations				
SUBJECT: GO LO ENTERTAINMENT, INC.					
(Name of corporation - must include suffix)					
Dear S	ir or Madam:				
"Certif	closed "Application by Foreign Corporation for Authorization to Transact Business in Florida," icate of Existence," and check are submitted to register the above referenced foreign corporation to the business in Florida.				
Please	return all correspondence concerning this matter to the following:				
MAF	RIE ROSE WILLIS				
	(Name of Person)				
SOURCE ENTERLINK COMPANIES, INC.					
	(Firm/Company)				
2750	00 RIVERVIEW CENTER BLVD.				
(Address) BONITA SPRINGS, FL 34134					
	(City/State and Zip code)				
For fur	ther information concerning this matter, please call:				
MARIE ROSE WILLIS at ( 239 ) 949-4450					
	(Name of Person) (Area Code & Daytime Telephone Number)				
	STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				
Enclose	ed is a check for the following amount:				
<b>√</b> \$70.	00 Filing Fee \$\bigcup \$78.75 Filing Fee & \bigcup \$78.75 Filing Fee & \bigcup \$87.50 Filing Fee, Certificate of Status & Certified Copy  \$\text{Certified Copy}\$				

### 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.

'	NTERTAINMENT, INC. corporation; must include "INCORPORAT	ED,	" "COMPANY," "CORPORATION,"	_
	Corp," "Inc," "Co," or "Corp.")	ŕ	,	
(If name unavail	able in Florida, enter alternate corporate na		adopted for the purpose of transacting business in Florida	
DELAWA	RE	3	33-1032662	
-·	under the law of which it is incorporated)	. J.	(FEI number, if applicable)	_
4. 10/03/200	2	5.	PERPETUAL	
(Date	e of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")	<del>-</del>
6				_
			n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
<sub>7</sub> 27500 RIV	•		BONITA SPRINGS, FL 34134	
/·	(Principal office			_
27500 RIV	ERVIEW CENTER BLVD	., E	BONITA SPRINGS, FL 34134	
<del></del>	(Current mailing	add	· · · · · · · · · · · · · · · · · · ·	<b>n</b> .
<sub>8.</sub> MAGAZIN	IE PUBLISHING		CRETA	F
(Purpose(s	s) of corporation authorized in home state of	r cc	برنيا	M
9. Name and stree	et address of Florida registered agent: (	P.C	D. Box NOT acceptable)	
Name:	Corporation Service Con	npa	any STA 1	
Office Address:	1201 HAYS STREET		——————————————————————————————————————	
	TALLAHASSEE		, <sub>Florida</sub> 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.

Jeanine Reynolds as its agent

(Ragistered 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. Names and business addresses of officers and/or directors: A. DIRECTORS FILED Chairman: Vice Chairman: \_\_\_\_ Address: \_ Director: MARC FIERMAN Address: 27500 RIVERVIEW CENTER BLVD., BONITA SPRINGS, FL 34134 Director: **B. OFFICERS** President: STEVE PARR Address: 27500 RIVERVIEW CENTER BLVD., BONITA SPRINGS, FL 34134 Vice President: \_\_\_ Address: Secretary: DOUGLAS J. BATES Address: 27500 RIVERVIEW CENTER BLVD., BONITA SPRINGS, FL 34134 Treasurer: Address: \_\_ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer listed in number 12 of the application)

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

<sub>14.</sub> DOUGLAS J. BATES, SECRETARY

## Delaware

PAGE 1

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GO LO 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 FOURTEENTH DAY OF DECEMBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GO LO ENTERTAINMENT, INC." WAS INCORPORATED ON THE THIRD DAY OF OCTOBER, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

2001 DEC 19 P 3: 14
SECRETARY OF STATE
AND ASSEE, FLORIDA

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Darriet Smith Window

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6240500

DATE: 12-14-07

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