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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL.
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(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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T. Burch NOV 2 8 2011

COVER LETTER

TO: New Filing Section Division of Corporations		
	ion - must include suffix	<u>C</u>
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation "Certificate of Existence," or "Certificate of Good S above referenced foreign corporation to transact bus	tanding" and check are submi	
Please return all correspondence concerning this ma	tter to the following:	
Shanea Ue	(00)	
Name	of Person	
Entertainm	n+PC, NO	
. 1	Company	
= = -	<u>03</u> Idress	
San Diego CA City/Star	e and Zip code	
entertainment PC = n E-mail address: (to be us	ed for future annual report not	tification)
For further information concerning this matter, pleas	se call:	
Name of Person at (910)	SSY - 149 ea Code & Daytime Telephon	3 ne Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING AD New Filing Sect Division of Corp P.O. Box 6327 Tallahassee, FL	ion porations
Enclosed is a check for the following amount:		
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & 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.
1. Entitainment PC, INC
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida).
2. California 3. 27-3217145 (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. July 21, 2010 (Date of incorporation) 5. "Perperson" (Duration: Year corp. will cease to exist or "perpetual")
(Datation: Teal corp. will cease to exist of perpetual)
6. <u>NA</u>
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7.5100 N 9th Aul, Pensacola FL 32504 (Principal office address)
Qua market 81. # 163 San Diego ca 9210 1 + (Current mailing address)
(Santaniana)
8. Viosit in the mail Selling exctronics (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
0. Name and street address of Florida resistand agents (F.O. Par. NOT accentable)
9. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)
Name: Sharea Vernon
Office Address: 5100 Nath aug
Pensaccia, Florida 32504
(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.

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			
Chairman:	<u>\$</u>	THE STATE OF THE S	
Address:	······································	5	<u> </u>
		7. S	1 2
Vice Chairman:		Lay His	-
Address:		St.	<u> </u>
			24
Director:			
Address:			
Director:			
Address:			
B. OFFICERS			
President: Shanea Vernon			
Address: 9109 Warret 81. # 103			
9 - 1			
Vice President:			
Address:			
Secretary:			
Address:			
Treasurer:			
Address:			
NOTE: If necessary, you may attach an addendum to the application listing a	additional officers and/or direc	ctors.	
13. I hanea Ulino			
Signature of Director or Officer	1 > 66 - 4 - 6 - 4 - 6	1 1	
The officer or director signing this document (and who is listed in number 12 are true and that he or she is aware that false information submitted in a document of the control of the co			
third degree felony as provided for in s.817.155, F.S.			
(Typed or printed name and capacity of person signing)	ng application)		

State of California Secretary of State

CERTIFICATE OF STATUS

PILED

MINOV 22 PN 4: 2

SECRETARY DE CIME

ENTITY NAME:

ENTERTAINMENTPC, INC.

FILE NUMBER:

C3309728

FORMATION DATE:

07/21/2010

TYPE:

DOMESTIC CORPORATION

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of November 07, 2011.

DEBRA BOWEN
Secretary of State

NP-25 (REV 1/2007)