

**FILED 00003060**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

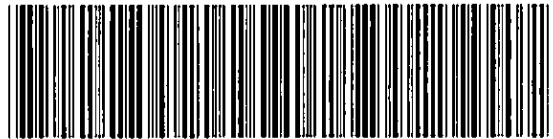
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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JUN 27 A 7:11

FALL RIVER, MA

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JUN 27 PM 4:10

7/3/18 25

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 277134 8093347

AUTHORIZATION :

*[Signature]*

COST LIMIT : \$ 70.00

ORDER DATE : June 27, 2018

ORDER TIME : 9:29 AM

ORDER NO. : 277134-005

CUSTOMER NO: 8093347

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JUN 27 A 7:11  
TALLAHASSEE, FL 32301

FOREIGN FILINGS

NAME: IN2UNE 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: Roxanne Turner -- EXT# 62969

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



# RESUBMIT

Please give original  
submission date as file date.

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 28, 2018

CSC

SUBJECT: IN2UNE INC.  
Ref. Number: W18000059847

We have received your document for IN2UNE INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please revise #'s 12 & 13 of application.

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) 245-6051.

Dionne M Scott  
Regulatory Specialist II

Letter Number: 618A00013435

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2018 JUN 27 AM 11:11  
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18 JUL -2 AM 10:48

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** IN2UNE INC.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Lizzie Moncrief

Name of Person	
Kohalt America Holdings, Inc.	
Firm/Company	
2 Gansevoort Street, 6th Floor	
Address	
New York, NY 10014	
City/State and Zip code	
lizzie.moncrief@kohaltmusic.com	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Lizzie Moncrief	646	756-5982
Name of Person	Area Code	Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee,<br>Certificate of Status &<br>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. IN2UNE INC.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
2. New York 3. DOS#- 4121094  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. July 21, 2011 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)
6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 2100 Ponce de Leon Boulevard, Suite 1210, Coral Gables, FL 33134  
(Principal office address)
- 2 Gansevoort Street, 6th Floor, New York, NY 10014  
(Current mailing address, if different)
8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: Corporation Service Company
- Office Address: 1201 Hays Street  
Tallahassee, Florida 32301  
(City) (Zip code)

**9. 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

By: Roxanne Turner

(Registered agent's signature)

**Roxanne Turner**  
Asst. Vice President

10. 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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CLARK COUNTY, FLORIDA

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

**A. DIRECTORS**

Chairman: Dale Connore

Address: 2 Gansevoort Street, 6th Floor, New York, NY 10014

Vice Chairman:

Address:

Director: Thomas Sansone

Address: 2 Gansevoort Street, 6th Floor, New York, NY 10014

Director: James Armay

Address: 2 Gansevoort Street, 6th Floor, New York, NY 10014

**B. OFFICERS**

President: Thomas Sansone

Address: 2 Gansevoort Street, 6th Floor, New York, NY 10014

Vice President:

Address:

Secretary: James Armay

Address: 2 Gansevoort Street, 6th Floor, New York, NY 10014

Treasurer:

Address:

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

12. \_\_\_\_\_

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

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

James Armay  
Secretary

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

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JUN 27 A 7:11  
CLERK OF THE COURT  
NEW YORK COUNTY

6/29/18

Dale Connone is CEO of In2une Inc.

*Lizzie Morcief*  
Lizzie Morcief

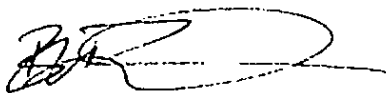
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2018 JUN 27 A 7:11  
CLERK OF COURT  
CLERK OF COURT

**State of New York**  
**Department of State** } ss:

I hereby certify, that the Certificate of Incorporation of IN2UNE INC. was filed on 07/21/2011, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

\*\*\*

*Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 26th day of June  
two thousand and eighteen.*



Brendan W. Fitzgerald  
Executive Deputy Secretary of State



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