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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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FOREIGN PROFIT/NONPROFIT CORPORATION

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A 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.

"Inc.," "Co.," "C	orporation, must include "INCORPORATED," " orp," "Inc." "Co," or "Corp.")	COMPANY," "CORPORATION,"		
(If name unavaila	able in Florida, enter alternate corporate name add	pted for the purpose of transacting bus	siness in Flori	
Delaware	3			
(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
January 26, 202	1 5			
(Date	of incorporation)	(Date of duration, if other than perpetual)		
		tenat mideacc)		
	(Principal office	Mireel address/		
······	·	ddress, if different)	567.1 100.1	
Name and street	·	ddress, if different)	727	
	(Current mailing a	ddress, if different)	2011 to -1.5	
Name:	(Current mailing a et address of Florida registered agent: (P.O. 1	ddress, if different)	1	
	(Current mailing a et address of Florida registered agent: (P.O. I Brett Shear 3300 Chase Ave.	ddress, if different)		

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.

DocuSigned by:	
Britt Shear	
1AA425938FA6409	(Registered agent's signature)

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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A. DIRECTORS				
■ Chairman	Name: Brett Shear	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
Director	Miami Beach, FL 33140	∃Director		
■ President		□President		
□Vice President		□Vice President		
■ Secretary	Treasurer	TiSecretary		Tireasurer
CEO CEO	□Other	□Other		□Other
∐Chairman	Name:	11 Chairman	Name:	
∃Vice Chairman	Address:	TiVice Chairman	Address:	
□Director		Director		
□President		□President		
27 Vice President		ITVice President		r~:
□Secretary	□Treasurer	□Secretary		DTreasurer ~
□Other	□Other	□Other		1
				-
⊒Chairman	Name:	_lChairman	Name:	
□Vice Chairman	Address:	□ Vice Chairman	Address:	
⊒Director		□Director		120
DPresident		LIPresident		
CIVice President		El Vice President		
Il Secretary	Treasurer	Il Secretary		□Treasurer
□Other	□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	□0ther		□Other
individuals may be	Use an attachment to report more than six (6). The eadded to the index when filing your Florida Depa	attachment will be image riment of State Annual Re	d for reporting eport form.	purposes only. Non-indexed
12. Britis	luar Signature of Direc	tor or Officer		
The officer or dire	ector signing this document (and who is listed in nu	mber 11 above) affirms th	at the facts stat	ed herein are true and that he or
she is aware that f	alse information submitted in a document to the De	partment of State constitu	acs a third degr	ec telony as provided for in

s.817,155, F.S.

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "FANCLUB STUDIOS 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 FIRST DAY OF FEBRUARY, A.D. 2021.

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

Authentication: 202416571

Date: 02-01-21