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(Requestor's Name)				
(Address)				
(Ad	dress)			
(Cit	ty/State/Zip/Phone	<del>;</del> #)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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## COVER LETTER '

TO:	Registration Section Division of Corporations			
SUBJ	ECT: Laserdise Enterprises, Inc.			
1,013.		oration - mu	st include suffix	
Dear S	iir or Madam:			
"Certif	iclosed "Application by Foreign Corporat ficate of Existence," or "Certificate of Go referenced foreign corporation to transact	od Standing	and check are subm	Business in Florida," nitted to register the
Please	return all correspondence concerning this	s matter to th	e following:	
Gordon	n M. Berger, Esq.			
	N	ame of Perso	on	
Fisherl	Broyles LLP			
-	Fir	m/Company		
3605 S	Sandy Plains Road, Suite 240-249			
		Address		
Mariet	ta, GA 30062			
	City	/State and Z	p code	
gordor	n.berger@fisherbroyles.com			:
	E-mail address: (to b	e used for fu	ture annual report no	otification)
For fu	rther information concerning this matter.	please call:		
Gordo	n M. Berger	70 4	ode Daytime Telephone Number	
	Name of Person A	rea Code	Daytime Teleph	one Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING AD Registration Se Division of Cot P.O. Box 6327 Tallahassee, FL	ction rporations
Please	sed is a check for the following amount: make check payable to: FLORIDA DEPAR 0.00 Filing Fee	& □ \$7	STATE 3.75 Filing Fee & rtified 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.

(If name unavailab	le in Florida, enter alternate corporate name ado	opted for the purpose of transacting business in Florida)	
Georgia 3 5		59-2975756 (FEI number, if applicable)	
(State or country under the law of which it is incorporated)			
4/24/1989	5	(Date of duration, if other than perpetual)	
(Date of	incorporation)	(Date of duration, if other than perpetual)	
_			
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.1502		
790 N County High	way 393 Ste 2A Santa Rosa Beach, FL 32459-		
	(Principal office		
1625 Cobb Parkwa	y SE Marietta, GA 30060	,	
	(Current mailing a	iddress, if different)	
Name and street	address of Florida registered agent: (P.O. I	Box NOT acceptable)	
Name:	Corporate Creations Network Inc.		
	801 US Highway 1		
ffice Address:			
	North Palm Beach	Florida	
	(City)	(Zip code)	

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

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

A. DIRECTORS							
□Chairman	Name: Kenneth D. Ellis	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address: 1625 Cobb Parkway SE				
□Director	Marietta, GA 30060	□Director	Marietta, GA 30060				
■ President		□President					
□Vice President		□Vice President					
□Secretary	□Treasurer	■ Secretary	□Treasurer				
■Other	Other CFO	□Other	Other				
□Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director		□Director					
□President		□President					
□Vice President		□Vice President					
Secretary	□Treasurer	□Secretary	☐ Treasurer				
□Other	Other	□Other	Other				
□Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director		□Director					
□President		□President	· .				
□Vice President		□Vice President					
☐ Secretary	☐ Treasurer	☐ Secretary	□Treasurer				
□Other	□ Other	□Other	Other				
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.  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.

Arloa A Bagorio, Secretary

Control Number: J908186

### STATE OF GEORGIA

#### Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

#### CERTIFICATE OF EXISTENCE

I, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

#### LASERDISC ENTERPRISES, INC.

a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 20531219 Date Inc/Auth/Filed: 04/24/1989 Jurisdiction : Georgia Print Date : 03/18/2021

Form Number : 211



Brad Raffensperger