

F230000005817

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H23000353462 3)))



H230003534623ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (954)208-0845
Fax Number : (614)573-3996

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: Lisa.Chan@mgae.com

**FOREIGN PROFIT/NONPROFIT CORPORATION
MGA ENTERTAINMENT INC**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

RECEIVED

2023 OCT -9 10:12:53

FLORIDA
DIVISION OF
CORPORATIONS

2023 OCT -9 AM 4:20

FILED

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. MGA ENTERTAINMENT 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. Delaware 3. 95-3726898
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 08/12/2022 5. Perpetual
(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. 9220 Winnetka Ave., Chatsworth, CA 91311
(Principal office street address)
- _____
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C.T. Corporation System

Office Address: 1200 South Pine Island Road

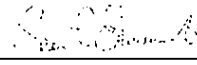
Plantation, Florida 33324
(City) (Zip code)

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.

C.T. Corporation System

SEAN L. EMERICK, ASSISTANT SECRETARY

By: 
(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

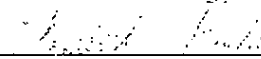
11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]

2023 OCT -9 AM 10:30
 FILED
 DEPT. OF STATE
 TALLAHASSEE, FL

A. DIRECTORS

<input type="checkbox"/> Chairman	Name	<u>Isaac Larian</u>	<input type="checkbox"/> Chairman	Name	<u>Rajmohan Murari</u>
<input type="checkbox"/> Vice Chairman	Address	<u>9220 Winnetka Ave., Chatsworth, CA 91311</u>	<input type="checkbox"/> Vice Chairman	Address	<u>9220 Winnetka Ave., Chatsworth, CA 91311</u>
<input type="checkbox"/> Director			<input type="checkbox"/> Director		
<input checked="" type="checkbox"/> President			<input type="checkbox"/> President		
<input type="checkbox"/> Vice President			<input type="checkbox"/> Vice President		
<input type="checkbox"/> Secretary		<input type="checkbox"/> Treasurer	<input type="checkbox"/> Secretary		<input type="checkbox"/> Treasurer
<input type="checkbox"/> Other		<input type="checkbox"/> Other	<input checked="" type="checkbox"/> Other	<u>Chief Financial Officer</u>	<input type="checkbox"/> Other
<input type="checkbox"/> Chairman	Name	<u>Jason Larian</u>	<input type="checkbox"/> Chairman	Name	<u>Bill Barad</u>
<input type="checkbox"/> Vice Chairman	Address	<u>9220 Winnetka Ave., Chatsworth, CA 91311</u>	<input type="checkbox"/> Vice Chairman	Address	<u>9220 Winnetka Ave., Chatsworth, CA 91311</u>
<input type="checkbox"/> Director			<input type="checkbox"/> Director		
<input type="checkbox"/> President			<input type="checkbox"/> President		
<input type="checkbox"/> Vice President			<input type="checkbox"/> Vice President		
<input type="checkbox"/> Secretary		<input type="checkbox"/> Treasurer	<input type="checkbox"/> Secretary		<input type="checkbox"/> Treasurer
<input type="checkbox"/> Other		<input type="checkbox"/> Other	<input type="checkbox"/> Other		<input type="checkbox"/> Other
<input type="checkbox"/> Chairman	Name	<u>Elizabeth Risha</u>	<input type="checkbox"/> Chairman	Name	<u>Mohan Gyan</u>
<input type="checkbox"/> Vice Chairman	Address	<u>9220 Winnetka Ave., Chatsworth, CA 91311</u>	<input type="checkbox"/> Vice Chairman	Address	<u>9220 Winnetka Ave., Chatsworth, CA 91311</u>
<input type="checkbox"/> Director			<input type="checkbox"/> Director		
<input type="checkbox"/> President			<input type="checkbox"/> President		
<input type="checkbox"/> Vice President			<input type="checkbox"/> Vice President		
<input checked="" type="checkbox"/> Secretary		<input type="checkbox"/> Treasurer	<input type="checkbox"/> Secretary		<input type="checkbox"/> Treasurer
<input type="checkbox"/> Other		<input type="checkbox"/> Other	<input type="checkbox"/> Other		<input type="checkbox"/> 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.

13. Elizabeth Risha, Corporate Secretary and General Counsel
(Typed or printed name and capacity of person signing application)

Attachment for Officer's and Director's: MGA ENTERTAINMENT INC.

Address for Officer's and Director's	9220 Winnetka Ave., Chatsworth, CA 91311
---	--

Name	Title
Isaac Larian	President and Chief Executive Officer / Director
Jason Larian	Vice-President / Director
Elizabeth Risha	Secretary and General Counsel
Rajmohan Murari	Chief Financial Officer
Mohan Gyani	Director
Jill Barad	Director
Bahram Nour-Omid	Director
Jasmin Larian	Director

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "MGA 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 SIXTEENTH DAY OF AUGUST, A.D. 2023.

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.

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State