F240000002131

(Re	questor's Name)				
———(Ad	dress)				
(Ad	dress)				
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	WAIT	MAIL			
(Business Entity Name)					
(Do	cument Number)				
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					
<u> </u>					

Office Use Only



200427007222

04/03/24--01015--003 *#87.50

144 YES -3 WHILL 1

COVER LETTER

TO:		tration Section ion of Corporations			
SUBJI	ECT:	Audio Video Exclusives, LLC			
3 0 B 0	201.	Name o	of corporation - 1	nust include suffix	
Dear S	ir or M	adam:			
"Certif	icate of	"Application by Foreign Co f Existence," or "Certificate ced foreign corporation to tr	of Good Standir	ig" and check are submitt	
Please	return :	all correspondence concerni	ng this matter to	the following:	
Megan	Hall				
			Name of Pe	rson	· · · · · · · · · · · · · · · · · · ·
Audio '	Video E	xclusives, LLC			
			Firm/Compa	ny	
7528 O	lympic —	View Drive #110		<u> </u>	
			Address		
Edmon	ids, WA	98026			
	_		City/State and	Zip code	
megan	<u> </u>	lusives.com F-mail address	· (to be used for	future annual report notif	ication)
				•	icacion)
For fur	ther in	formation concerning this m	atter, please call	:	
Megan	Hall		at (425	245-8846	
	Nam	e of Person	Area Code	Daytime Telephone	e Number
	Regis Divis The C 2415	EET/COURIER ADDRESS tration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 nassee, FL 32303		MAILING ADD Registration Section Division of Corpo P.O. Box 6327 Tallahassee, FL 3	on rations
Please r	make ch	check for the following amo eck payable to: FLORIDA DE ing Fee	EPARTMENT O g Fee & 🗆 🗆 \$		S87.50 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. Audio Video Exclusives, LLC							
	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	." "COMPANY," "CORPORATION,"					
Audio Video Ex	clusives, LLC Washington State						
(If name unavaila	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)						
2 Washington 3.		46-3333269					
(State or country under the law of which it is incorporated)		(FEI number, if applicable)					
4. 8/2/2013 5.		8/2/2013 - present					
(Date	of incorporation)	8/2/2013 - present (Date of duration, if other than perpetual)					
6. N/A							
		n Florida, if prior to registration) 502. F.S., to determine penalty liability)					
7. 7528 Olympic Vi	ew Drive #110, Edmonds, WA 98026						
	(Principal of	ice street address)					
same							
 	(Current maili	ng address, if different)					
			707				
8. Name and stree	et address of Florida registered agent: (P.	D. Box NOT acceptable)	ZUZH APR				
Name:	Registered Agents Inc.		- × ·				
Office Address:	7901 4th Street N. STE 300	•	ယ်				
	St. Petersburg		4H III : 4				
	(City)	(Zip code)					
designated in this further agree to c	ed as registered agent and to accept serv application, I hereby accept the appoint	ice of process for the above stated corporation at ment as registered agent and agree to act in this o relative to the proper and complete performance o soition as registered agent.	capacity. I				
	David Box	erts -					
	(Registered agent's s	ignature)					

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.

A. DIRECTORS Megan Hall Craig Holmes □ Chairman Name: □ Chairman 7510 176th Street SW 7510 176th Street SW Address: □ Vice Chairman □ Vice Chairman Address: Edmonds, WA 98026 Edmonds, WA 98026 □ Director □Director President □President □ Vice President ■ Vice President ☐ Secretary □Treasurer □ Secretary □Treasurer □Other _____ □Other _____ Other ____ Other _ Name: _____ Name: ☐ Chairman ☐ Chairman □Vice Chairman Address: _____ Address: ____ ☐ Vice Chairman □ Director □ Director ☐ President □ President □Vice President __ ☐ Vice President □ Secretary ☐ Treasurer □ Secretary ☐ Treasurer ☐Other _____ Other _____ Other _____ □Other _____ □ Chairman □ Chairman Name: □ Vice Chairman Address: □ Vice Chairman Address: ____ □ Director Director □ President □ President ☐ Vice President ☐ Vice President □ Secretary ☐ Treasurer ☐ Secretary ☐'l'reasurer □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. 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. President

3 ALLEGAR .



Secretary of State

I, STEVE R. HOBBS, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE

OF

AUDIO VIDEO EXCLUSIVES, LLC

I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 08/02/2013.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

Issued Date: 03/19/2024 UBI Number: 603 322 276

STATE OF THE STATE

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Steve R. Hobbs, Secretary of State

Date Issued: 03/19/2024