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(((H240002808583)))



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| 92       | Account Name : GERALD WEINBERG, P.C.                             |
| ر م ندا  | Account Number : I20030000043                                    |
| . •      | Phone : (800)342-9856  |
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#### FOREIGN PROFIT/NONPROFIT CORPORATION KLUTCH MEDIA INC.

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FLORIDA DEPARTMENT OF STATE

Division of Corporations

August 22, 2024

GERALD WEINBERG, P.C.

SUBJECT: KLUTCH MEDIA INC

REF: W24000119064

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name on the cover page (KLUTCH MEDIA FL INC) and the name on the document (KLUTCH MEDIA LLC) must be the same.,

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,

Tracy L Lemieux Regulatory Specialist II

FAX Aud. #: H24000280858 Letter Number: 724A00018818

# 464. 22. 2024 12:549M FIX TOUCH & US SECTION 1673 F. 3. 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.

| KLUTCH MEI  | DIA FL INC.  |   |                     |
|---|--|---|---------------------|
| (If name unavai   | lable in Florida, enter alternate corporate nan  | ne adopted for the purpose of transacting busin   | ness in Flacida)    |
|   |  |   |                     |
| (State or count   | ry under the law of which it is incorporated)  | 3. 99-4542272 (FEI number, if applicable  | (c)                 |
| P. 40 (20 00 4  |  |   |                     |
|   |  | 5. (Date of duration, if other than pe  | rpetual)            |
|   | (Date first transacted business<br>(SEE SECTIONS 607.1501 & 607.<br>T, BELLMORE, NY 11710                  | in Florida, if prior to registration) 1502, F.S., to determine penalty liability)   | <del></del>         |
|   | <u></u>  | ffice <u>street</u> address)  | <del></del>         |
|   | ` '  |   |                     |
|   | (Current mail  | ing address, if different)  |                     |
| Name and street   | et address of Florida registered agent: (P   | .O. Box <u>NOT</u> acceptable)  | 20ZH AUG            |
|   | STEPHANIE DAGOSTINO  |   | .;6 2               |
| Name:   | 261 YORKSHIRE DR   |   | .2                  |
|   |  |   | <del></del>         |
|   | ST AUGUSTINE   | Florida 32092   |                     |
| Name:<br>ffice Address:   | ST AUGUSTINE (City)  | , Florida 32092 (Zip code)  | կ։ 28               |
| fice Address:  Registered ugaving been namsignated in this ther agree to contact the contact that the contact the | ent's acceptance;<br>ed as registered agent and to accept serv<br>application, I hereby accept the appoint | Acc of process for the above stated corporment as registered agent and agree to ac<br>relative to the proper and complete perfo | ration at the place |

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

House.

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

#### Aug. 22 2024 12:55FM Al-DIRECTORS

### 1104 UUU00000500 No. 1673 F. 4

| □Chairman ,  | Name:KRISTIN CABRERA   | □Chairman  | Name. STEPHANIE DAGOSTINO   |  |
|--|--|--|---|--|
| Vice Chairman  | 2126 LEGION ST   | □Vice Chairman   | Address: 261 YORKSHIRE DR   |  |
| Director   | BELLMORE, NY 11710   | ■Director  | ST AUGUSTINE, FL 32092  |  |
| □President   |  | ⊕President   |   |  |
| □Vice President  |  | □Vice President  |   |  |
| ☐ Secretary  | □ Treasurer  | □Secretary   | Trepsurer   |  |
| Othez  |  | □Qther   |   |  |
| <del>-</del>   |  |  |   |  |
| Chaicman   | 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  |  |
| C) Chairman  | Name:  | El Chairman  | Name:   |  |
|  | Address:   | □ Vice Chairman  |   |  |
| Director   | •  | Director   | Address:  |  |
| □ President  |  | □President   |   |  |
| ☐ Vice President   |  |  |   |  |
| □ Secretary  |  | □Vice President  |   |  |
| •  | ☐ Treasurer  | ©Secretary   | ☐ Treasure/   |  |
| □Other   | Other  | Other  | []Other   |  |
| individuals may be   | Use an attachment to report more than six (6). The added to the index when filing your Florida Dep   | artment of State Annual Re-                                  | nort form   |  |
| 12   | S S S S S S S S S S S S S S S S S S S  | EPHAME DAGOSTIA  | 0   |  |
|  |  |  |   |  |
| The officer or direct she is aware that fa s.817.155, F.S. | etor signing this document (and who is listed in a lise information submitted in a document to the E | umber 11 above) affirms the<br>Department of State constitut | it the facts stated herein are true and that he or<br>es a third degree felony as provided for in |  |
| 13   | STEPHA   | NIE DAGOSTINO  |   |  |

## 11240002808583

STATE OF NEW YORK

#### DEPARTMENT OF STATE

Certificate of Status

I, WALTER T. MOSLEY, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a different examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: KLUTCH MEDIA INC.

DOS 1D Number: 7401550

Entity Type: DOMESTIC BUSINESS CORPORATION

Entity Status: EXISTING
Date of Initial Filing with DOS: 08/20/2024

Statement Status: CURRENT Statement Due Date: 08/31/2026

No information is available from this office regarding the financial condition, business activity or practices of this entity



WITNESS my hand and official seal of the Department of State, at the City of Albany, on August 21, 2024 at 03:17 P.M.

WALTER T. MOSLEY Secretary of State

Brandon C Hugha

BRENDAN C. HUGHES
Executive Deputy Secretary of State

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