

**MO4000001153**

Florida Department of State  
Division of Corporations  
Public Access System

## 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.**

(((H04000061029 3)))

**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) 205-0383

## From:

Account Name : A. BERNARD BOOKKEEPING & TAX SERVICE, INC.  
Account Number : 071162000147  
Phone : (305) 251-4591  
Fax Number : (305) 251-1975

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 MAR 26 PM 3:42

FILED

**FOREIGN LIMITED LIABILITY COMPANY****FC MANAGEMENT, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

SECRETARY OF CORP. ORATION

04 MAR 25 PM 2:29

RECEIVED

[Electronic Filing Menu](#)

[Corporate Filing](#)

[Public Access Help](#)

**MO4-1153**  
*OK*

Audits H040000610293

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN  
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. FC MANAGEMENT, LLC  
(Name of foreign limited liability company)
2. STATE OF ARIZONA  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 02-0716683  
(FEI number, if applicable)
4. MARCH 09, 2004  
(Date of Organization)
5. PERPETUAL  
(Duration: Year limited liability company will cease to exist or "perpetual")
6. AS APPROVED BY THE STATE OF FLORIDA  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 13727 SW 152ND STREET, SUITE 319  
MIAMI, FLORIDA 33177  
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☒

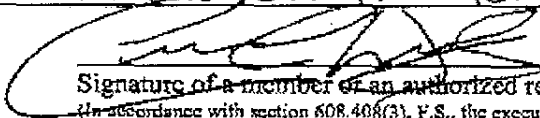
9. The name and usual business addresses of the managing members or managers are as follows:

CECIL T CHAMBERS 13727 SW 152ND STREET, STE 319, MIAMI, FL 33177

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: MANAGEMENT

FOR ENTERTAINMENT ARTISTS

  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

CECIL T CHAMBERS

Typed or printed name of signee

Audits H040000610293

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,  
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING  
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE  
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

FC MANAGEMENT, LLC

2. The name and the Florida street address of the registered agent and office are:

GINA FORD

(Name)

13727 SW 152ND STREET, STE 319

Florida street address (P.O. Box **NOT** ACCEPTABLE)

MIAMI

FL 33177

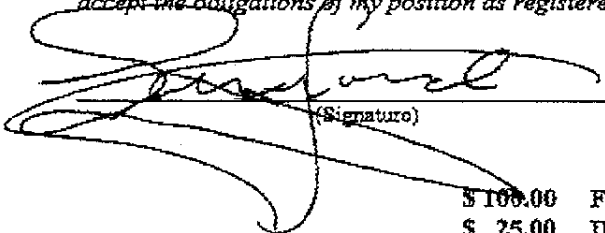
(City/State/Zip)

RECEIVED  
TALLAHASSEE, FLORIDA

04 APR 26 PM 3:42

FILED

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.*

  
(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

# STATE OF ARIZONA



## Office of the CORPORATION COMMISSION

### CERTIFICATE OF GOOD STANDING

To all to whom these presents shall come, greeting:

I, Brian C. McNeill, Executive Secretary of the Arizona Corporation Commission, do hereby certify that

#### \*\*\*FC MANAGEMENT, LLC\*\*\*

a domestic limited liability company organized under the laws of the State of Arizona, did organize on the 9th day of March 2004.

I further certify that according to the records of the Arizona Corporation Commission, as of the date set forth hereunder, the said limited liability company is not administratively dissolved for failure to comply with the provisions of A.R.S. section 29-601 et seq., the Arizona Limited Liability Company Act; and that the said limited liability company has not filed Articles of Termination as of the date of this certificate.

This certificate relates only to the legal existence of the above named entity as of the date issued. This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's condition or business activities and practices.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the official seal of the Arizona Corporation Commission. Done at Phoenix, the Capital, this 22nd Day of March, 2004, A. D.



Executive Secretary

By Brian C. McNeill

STATE OF ARIZONA  
TOLSON  
MAR 26 2004

04 MAR 26 PM 3:42

FILED