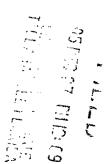
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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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M. HODGES





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JURSINSKI PA

2393375364

COVER LETTER

TO:	Registration Section	
	Division of Corporations	

SUBJECT: <u>FOUNTAIN ENTERTAINMENT</u> LC.

(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida...

Please return all correspondence concerning this matter to the following:

ANTHONG PENA. (Name of Person)
(Name of Person)
FOONTAIN ENTERTHINMENT LCC.
(Firm/Company)
5450 W. 16th Ava.
(Address)
KIACEAK, FL. 33012
(City/State and Zip Code)

For further information concerning this matter, please call:

at (365) 778 - 6624 (Area Code & Daytime Telephone Number)

MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount: Lis 155.00 Filing Fee & Si60.00 Filing Fee, Certificate takes Certified Copy of Status & Certified Copy S125.00 Filing Foo S130.00 Filing Foe & Certificate of Status



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 15, 2005

ANTHONY PENA FOUNTAIN ENTERTAINMENT LLC 5450 W. 16TH AVE. HIALEAH, FL 33012

SUBJECT: FOUNTAIN ENTERTAINMENT LLC

Ref. Number: W05000051059

We have received your document for FOUNTAIN ENTERTAINMENT LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's date of incorporation/organization must be listed in the document.

You must complete number 9 of the application, the management.,

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6967.

Michelle Hodges Document Specialist

Letter Number: 405A00067632

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

IN LU	COMPLIANCE WITH SECTION 608:503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1	FOONTAIN ENTERTHINMENT LLC. (Name of Foreign Limited Liability Company)
٠٠,	(Name of Poreign Limited Liability Company)
2.	NEBLASIER USA-3. 56-2529707 [Inrisdiction under the law of which foreign limited hability (FEI number, if applicable)
7	
,	SED & 200 PERPETURE.
4,	Date of Organization) 5. ERPETUAL. (Duration: Year limited liability company will cease to
	(Date of Organization) (Dissiant: 1 ear inflict factority company with community and community company with community company
б.	OCT 15, 2005
υ.	Date first transacted business in Florida, if prior to registration.) (See sections 698.501 & 608.592 F.S. to determine penalty liability)
7.	5450 W. 16th Ave. KIACEAN, FL-33012
	(Street Address of Principal Office)
0	If limited liability company is a manager-managed company, check here
\$.	It minted havinty continuity is a manager-managed continuity, check here
9.	The name and usual business addresses of the managing members or managers are as follows:
	ANTHONY LIPEWA, 5450 W 16 LLAVE HIRLAND PL. 33012
	HATHONY CITEMA, 5400 W LO ELAUC HUMAN PC. 35012
	·
•	
1A	Attached to a calcing and the straightness are made at 1 to 1
ru the	. Attached is an original certificate of existence, no more than 90 days old, duly nuther ticated by the official having outlody of records in jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a firmigh language, a
	minim of the certificate under onth of the translator must be submitted.)
	ρ_{-}
11	. Nature of business or purposes to be conducted or promoted in Florida.
	AMUSEMENT ARCHOE
	1100
	- Contract of the contract of
	Signature of a member of an authorized representative of a member. (in accordance with section 608.408(3), F.S., the execution of this document constitutes
	on affirmation under the penalties of penjury that the facts stated herein are true.)
	ANTHONY PENA.
	Typed or printed name of signee

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:	
FOUNTAIN ENTERTAINMENT LLC	
2. The name and the Florida street address of the registered agent and office are:	
ANTHONY L PEWA	
5450 W 16 AUE Florida Street Address (P.O. Box NOT ACCEPTABLE)	
HIARPAG FL 33012.	

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, Florida Statutes.

\$ 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



NEBRASKA

United States of America, State of Nebraska

ss.

Department of State Lincoln, Nebraska

I, John A. Gale, Secretary of State of Nebraska do hereby certify;

FOUNTAIN ENTERTAINMENT, L.L.C.

with its registered office located in OMAHA, Nebraska, filed Articles of Organization in this office on September 8, 2005.

I further certify that said limited liability company is in existence as of this date.

In Testimony Whereof,

I have hereunto set my hand and affixed the Great Seal of the State of Nebraska on December 7, 2005.

SECRETARY OF STATE

