M08000001842

(Requestor's Name)		
(Address)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
L. SELLERS		
L. SELLENS		
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SECRETARY OF STATE AND AND ASSETS FOR ITALIAN ASSET

FICED

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: The Animation Closet, LLC (Name of Limited Liability Company)					
Please return all correspondence concerning this n	natter to the following:				
Scott Ball					
(Na	me of Person)				
The Animation Closet, LLC					
(Fin	rm/Company)				
734 Whisper Sound St					
	(Address)				
Minneola, Florida 34715					
(City/St	ate and Zip Code)				
For further information concerning this matter, ple	ease call:				
Scott Ball	at (407) 690-2494				
(Name of Person)	(Area Code & Daytime Telephone Number)				
MAILING ADDRESS:	STREET ADDRESS:				
Division of Corporations	Division of Corporations				
P.O. Box 6327	Clifton Building				
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301				
Enclosed is a check for the following amount: \$\sum_\$125.00 \text{ Filing Fee} \sum_\$130.00 \text{ Filing Fee & Certificate of }	\$155.00 Filing Fee & \$\subset\$				



April 1, 2008

SCOTT BALL 734 WHISPER SOUND STREET MINNEOLA, FL 34715

SUBJECT: THE ANIMATION CLOSET, LLC

Ref. Number: W08000016811

We have received your document for THE ANIMATION CLOSET, 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):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

The registered agent must sign accepting the designation.

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.

Letter Number: 208A00019191

Leslie Sellers Regulatory Specialist II

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

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

1	The Animation Closet, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.,"	or "LL	C.")	_
con	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and atta sent of the managers or managing members adopting the alternate name. The alternate name must includ npany," "L.L.C.," "LLC.")			
$\overline{(}$	Texas **Iurisdiction under the law of which foreign limited liability ompany is organized)** 58-2635098 (FEI number, if applicable of the law of which foreign limited liability of the law of the law of which foreign limited liability of the law of the	e)		-
4. :	June 15, 2001 (Date of Organization) 5. perpetual (Duration: Year limited liability comparation or "perpetual")	ny will	cease to	_
·	April 1, 2008 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		• • • • • • • • • • • • • • • • • • • •	-
7.	734 Whisper Sound St Minneola, FL 34715			-
8.	(Street Address of Principal Office) 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 for Scott Ball; 734 Whisper Sound St, Minneola, FL 34715	ollows:		_
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official have unsdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a for			- cords in
	slation of the certificate under cath of the translator must be submitted.) Nature of business or purposes to be conducted or promoted in Florida:			_
	animation, illustration	17.T 35	2008	
-	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.) Scott Ball Typed or printed name of signee	CRETARY OF STATE	8 APR 16 AM 8: 06	FILED

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 t	ne Limited Liability Company is:
The Animatic	on Closet, LLC
If name unavaila	ble, the alternate name to be used in the state of Florida is:
	I the Florida street address of the registered agent and office are: The Animation Closet, LLC
-	(Name)
	734 Whisper Sound St Florida Street Address (P.O. Box NOT ACCEPTABLE)
<u>.</u>	Minneola, FL 34715 FL City/State/Zip

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)

2008 APR 16 AM 8: 06

The State of Was Secretary of State

CHARA.



Washington

I, SAM REED, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

CERTIFICATE OF EXISTENCE/AUTHORIZATION OF

THE ANIMATION CLOSET, LLC

I FURTHER CERTIFY that the records on file in this office show that the above named Limited Liability Company was formed under the laws of the State of TX and was issued a Certificate Of Registration in Washington on 7/8/2004.

I FURTHER CERTIFY that as of the date of this certificate, THE ANIMATION CLOSET, LLC remains active and has complied with the filing requirements of this office.

Date: March 19, 2008

UBI: 602-422-845

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

Sam Reed, Secretary of State