# MORODO002931

| (Requestor's Name)                      |  |  |  |  |  |
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| PICK-UP WAIT MAIL                       |  |  |  |  |  |
|   |  |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |  |
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| (Document Number)                       |  |  |  |  |  |
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| Certified Copies Certificates of Status |  |  |  |  |  |
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| Special Instructions to Filing Officer: |  |  |  |  |  |
| Special instructions to Filing Officer, |  |  |  |  |  |
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| L. SELLERS                              |  |  |  |  |  |
| JUN 20 2008                             |  |  |  |  |  |
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| EXAMINED                                |  |  |  |  |  |

Office Use Only



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SECRETARY OF STATE

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#### COVER LETTER

Registration Section
Division of Corporations

TO:

| SUBJECT:        | TIME IS MONEY ENTER  | RTAINMENT LLC  |  |  |  |
|-----------------|--|--|--|--|--|
|                 |  | Limited Liability Company)   |  |  |  |
| Florida," Cer   |  | Liability Company for Authorization to Transact Business in the submitted to register the above referenced foreign limited a |  |  |  |
| Please return   | all correspondence concerning th   | is matter to the following:  |  |  |  |
|                 | TIM LLC  |  |  |  |  |
|                 |  | (Name of Person)   |  |  |  |
|                 | C/O WEALTH MANAGE  | EMENT  |  |  |  |
|                 |  | (Firm/Company)   |  |  |  |
|                 | 598 BROADWAY, 3RD FL   |  |  |  |  |
|                 |  | (Address)  |  |  |  |
| ,               | NEW YORK, NY 10012   |  |  |  |  |
|                 | (City  | /State and Zip Code)   |  |  |  |
| For further in  | nformation concerning this matter,   | please call:   |  |  |  |
| Sula            | aiman/Marc   | at ( 646 ) 839-5514  |  |  |  |
|                 | (Name of Person)   | (Area Code & Daytime Telephone Number)   |  |  |  |
| Divis<br>P.O. 1 | LING ADDRESS:<br>ion of Corporations<br>Box 6327<br>hassee, FL 32314           | STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301                 |  |  |  |
|                 | check for the following amount: 5.00 Filing Fee \$130.00 Filing Fee Certificat | e & 🗹 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee, Certificate e of Status & Certified Copy                                  |  |  |  |

#### APPLICATION BY FOREIGN 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 FOREKIN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| 1. TIME IS MONEY ENTERTAINMENT  |                 |  | •                          | •                      |
|---|-----------------|--|----------------------------|------------------------|
| (Name of Foreign Limited Liability Company; must inc  | clude           | "Limited Liability Company," "L.L.C.," o   | r "LLC.")                  |                        |
| (If name unavailable, enter alternate name adopted for the purp<br>consent of the managers or managing members adopting the al<br>Company," "L.L.C.," "LLC.")   | pose<br>ltern   | of transacting husiness in Florida and attack<br>ate name. The alternate name must include | h a copy of<br>'Limited I. | f the written lability |
| <sub>2</sub> STATE OF DELAWARE  | 3.              | 26-2322168   |                            |                        |
| (Jurisdiction under the law of which foreign limited liability company is organized)  | ,               | (FEI number, if applicable)  |                            |                        |
| 4. 12/6/07  | 5.              | Perpetual  |                            |                        |
| (Date of Organization)  |                 | (Duration: Year limited liability company exist or "perpetual")                            | will cease                 | e to                   |
| 6. N/A  |                 |  |                            |                        |
| (Date first transacted business in F<br>(See sections 608.501 & 608.502 F.  | lori<br>S. to   | la, if prior to registration.) determine penalty liability)                                |                            |                        |
| 7. 2411 NW 138TH DR   |                 |  |                            |                        |
| SUNRISE, FL 33323-5321  |                 |  |                            | <del></del>            |
|   | s of            | Principal Office)  |                            | <del>_</del>           |
| 8. If limited liability company is a manager-manage   | d co            | ompany, check here   |                            | •                      |
| 9. The name and usual business addresses of the man   | nag             | ing members or managers are as foll  | ows:                       |                        |
| KISEAN ANDERSON   |                 |  |                            |                        |
| 2411 NW 138TH DR  |                 |  |                            |                        |
| SUNRISE, FL 33323-5321  |                 |  |                            |                        |
| 10. Attached is an original certificate of existence, no more than 90 the jurisdiction under the law of which it is organized. (A photocop translation of the certificate under oath of the translator must be sub- | py is           | not acceptable. If the contificate is in a foreign   |                            |                        |
| 11. Nature of business or purposes to be conducted o  | or pi           | omoted in Florida: MUSICAL PR  | ODUCT                      | TION;                  |
| PERFORMANCE /   |                 |  | 널                          | ~                      |
| Muse In   |                 |  | ECS<br>LLA                 | C 8662                 |
| Signature of a member or an at  | itho            | rized representative of a member.  | HAS                        | È T                    |
| (In accordance with section 608.408(3), F<br>an affirmation under the penaltics of per  | F.S.,<br>jury i | the execution of this document constitutes that the facts stated herein are true.)         | 388                        | 9                      |
| KISEAN ANDERSON   |                 |  | يات<br>ترين                | 3 1                    |
| Typed or printed  | d na            | me of signee   | 1927<br>1927<br>1937       | <b>=</b> 3             |

### 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:   |
|--|
| TIME IS MONEY ENTERTAINMENT LLC  |
| If name unavailable, the alternate name to be used in the state of Florida is:   |
| 2. The name and the Florida street address of the registered agent and office are:   |
| KISEAN ANDERSON  |
| (Name)   |
| 2411 NW 138TH DR   |
| Florida Street Address (P.O. Box NOT ACCEPTABLE)   |
| SUNRISE, FL 33323-5321 $_{ m FL}$  |
| 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. |

(Signature)

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

## Delaware

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TIME IS MONEY ENTERTAINMENT LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTEENTH DAY OF JUNE, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4468840 8300

080694971

You may verify this certificate online at corp.delaware.gov/authver.shtml

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6664797

DATE: 06-17-08