## M0900000626

(F	Requestor's Name)		
(A	ddress)		
(A	ddress)	<u>.</u> .	
(C	ity/State/Zip/Phone #)		
. PICK-UP	☐ WAIT	MAIL	
(B	usiness Entity Name)		
(Document Number)			
Certified Copies	Certificates of	Status	
Special Instructions to	Filing Officer:		





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SECRETARY OF STATE .

DIVISION OF CORPORATION

T. HAMPTON

FEB 1 6 2009

EXAMINER

#### **COVER LETTER**

	stration Section ion of Corporations	·
SUBJECT:	PIPLORN HERE TRA (Name of Lim	PEZE GROUP, LLC ited Liability Company)
Florida," Cert		ability Company for Authorization to Transact Business in abmitted to register the above referenced foreign limited
Please return	all correspondence concerning this n	natter to the following:
	Susan W	me of Person)
	POPLOVZM H	ERE TRAPETE GROUP, LLC m/Company)
•	20965 NE 19T	(Address)
	MIAMI, FI	33179 ate and Zip Code)
For further inf	formation concerning this matter, ple	ase call:
	Susan Williams (Name of Person)	at ( <u>512</u> ) <u>US · UU 13</u> (Area Code & Daytime Telephone Number)
Divisio P.O. B	on of Corporations Sox 6327 assee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a c	check for the following amount:  .00 Filing Fee \$\sum \text{S130.00 Filing Fee & Certificate of }   \tex	\$155.00 Filing Fee & \$\Bigsquare{1}\$160.00 Filing Fee, Certificate Status Certified Copy 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 FOREIGN

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: POPLORN HERE TRAVE ZE GROUP, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.") STATE OF OHO
(Jurisdiction under the law of which foreign limited liability)

3. 30-0484904
(FEI number, if applicable) (Date of Organization) PERPETUAL (Duration: Year limited liability company will cease to (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 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: Susan Williams - 16 Yander Terrale, Cinti, OH 45208 Bandy Kohn + Christopher Milam - 1237 Grand Street, Westpury, MY 11590 Manuel martinez/- 13 GAT ST, NY, NY 10014 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in

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: 

12. Value of business or purposes to be conducted or promoted in Florida:

the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a

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.)

Susan Williams
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.

POPLORM HERE TRAPETE GROUP, 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:	<del>- 4 · · · · · · · · · · · · · · · · · · </del>
Susan Williams (Name)	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
MIAMI FL 33/79 City/State/Zip	
Having been named as registered agent and to accept service of process for the above state liability company at the place designated in this certificate, I hereby accept the appointment agent and agree to act in this capacity. I further agree to comply with the provisions of all relating to the proper and complete performance of my duties, and I am familiar with and a obligations of my position as registered agent as provided for in Chapter 608, Florida State	nt as registerea statutes accept the
(Signature)  \$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent	SECRETARY DIVISION OF CO

**Certified Copy (optional)** 

Certificate of Status (optional)

\$ 30.00

5.00

# United States of America State of Ohio Office of the Secretary of State

I, Jennifer Brunner, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show POPCORN HERE TRAPEZE GROUP, LLC, an Ohio Limited Liability Company, Registration Number 1775594, was organized within the State of Ohio on April 22, 2008, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 12th day of February, A.D. 2009

**Ohio Secretary of State** 

Validation Number: V200940FFDABD