M09000	000 4813
(Requestor's Name) (Address) (Address)	200162965742
(City/State/Zip/Phone #)	200162965742 12/09/0901035017 **160.00 SECRETARY OF STATE TALLAHASSEE, FLORIDA
Office Use Only	M. THOMAS DEC 1.0 2009 EXAMINER

| |

COVER LETTER

TO: **Registration Section Division of Corporations**

Kentucky Music and Entertainment Group, LLC SUBJECT:

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:

Jeremy Brook	
Name of Person	2
Stites & Harbison, PLLC	F11-
401 Commerce Street, Suite 800	
Nashville, TN 37219	AM 11: 56
City/State and Zip Code	
kmegonline@gmail.com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
DeShawn Johnsonat (813) 314-2186	
Name of Person Area Code & Daytime Telephone Number	

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

STREET ADDRESS: **Division of Corporations**

Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

\$125.00 Filing Fee

\$130.00 Filing Fee & Certificate of Status

Certified Copy

\$155.00 Filing Fee & 🚺 \$160.00 Filing Fee, Certificate 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:

1.	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
	(Name of Foreign Limited Lizonny, Company, must mender Chiniced Lizondry Company, D.D.C., of E.C.,)	
con	"name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written insent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability company," "L.L.C." "LLC."	
2.	Kentucky 3. 27-0302568	
-,	(Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)	
4	June 2, 2009 5. Perpetual (Date of Organization) 5. (Duration: Year limited liability company will cease to	
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
6;		
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7	10150 Highland Manor Drive, Suite 200	
	Tampa, FL 33610-9712 Age (Street Address of Principal Office)	
		1000 1000 No. 1
8,	If limited liability company is a manager-managed company, check here	m
9.	The name and usual business addresses of the managing members or managers are as follows:	
	DeShawn L. Johnson	
	10150 Highland Manor Drive, Suite 200	
	Tampa, FL 33610-9712	
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in ejurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a instation of the certificate under oath of the translator must be submitted.)	

Signature of a member or an authorized representative of a member. (In accordance with section 60% 408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) DeShawn L. Johnson

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:

Kentucky Music and Entertainment Group, LLC

If unavailable, the alternate to be used in the state of Florida is:

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

DeShawn L. Johnson (Name)

10150 Highland Manor Drive, Suite 200 Florida Street Address (P.O. Box <u>NOT ACCEPTABLE</u>) FILLE U BODEC -9 AHII: 56 SECRETARY OF STATE

Tampa, FL 33610-9712 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)

Commonwealth of Kentucky Trey Grayson, Secretary of State

Trey Grayson Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Certificate of Existence

Authentication number: 89425 Visit <u>http://apps.sos.ky.gov/business/obdb/certvalidate.aspx</u>.to.authenticate this certificate.

I, Trey Grayson, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

Kentucky Music and Entertainment Group, LLC

is a limited liability company dùly organized and existing under KRS Chapter 275, whose date of organization is June 2, 2009 and whose period of duration is perpetual.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 275.190 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 3rd day of December, 2009; in the 217th year of the Commonwealth

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F.0



Trey Grayson

Secretary of State Commonwealth of Kentucky 89425/0730984