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2010 MAR -1 PM 2: 03
SECRETARY OF STATE

T. CLINE

MAR - 2 2010

**EXAMINER** 

#### **COVER LETTER**

TO:

TO:	Registration Section Division of Corporations						
SUBJE	CT:	3x a Charm, LLC					
		Name of Limited Liability Company					
Existenc	e, and check are submitted to	n Limited Liability Company for Authorization to Transact Business in register the above referenced foreign limited liability company to trans	Florida," Certifica sact business in Flo	ite of orida			
Please re	eturn all correspondence conc	erning this matter to the following:					
		Jeri Shapiro					
		Name of Person					
		Woodbridge Structured Funding, LLC					
		Firm/Company	_ <del></del>				
		12031 Ventura Blvd, Suite 3					
		Address					
		Studio City, CA 91604	<u> </u>				
		City/State and Zip Code					
		dianab@woodbridgeinvestments.com	2010 MAR - 1 SECRETARY	Careers Careers			
	E-r	nail address: (to be used for future annual report notification)	SSE	1			
For furth	ner information concerning th	is matter, please call:	PH 2: 03				
	Diana Ba	alayan at ( 818 ) 487-0400	P: O:				
	Name of P	erson Area Code & Daytime Telephone Number	7				
	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					
Enclose	ed is a check for the follo	owing amount:					
[	\$125.00 Filing Fee		ng Fee, Certificate & 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 i	Char	m, LLC	"I C " or "I C ")	_
	(Name of Foreign Limited Liability Company, must i	meruu	Elimited Liability Company,	L.L.C., of LLC.	
cor	name unavailable, enter alternate name adopted for the passent of the managers or managing members adopting the mpany," "L.L.C," "LLC.")				
2.	Delaware	3	27-1722	2896	
 (	Delaware (Jurisdiction under the law of which foreign limited liabil company is organized)	ity .	( FEI number, if	applicable)	_
4.	January 19, 2010	5.	Perpe	tual	
	(Date of Organization)		(Duration: Year limited liabili exist or "perpetual")	ty company will cease to	
6.	Upon qualification				
	(Date first transacted business in (See sections 608.501 & 608.502	n Flori F.S. to	da, if prior to registration.) o determine penalty liability)		_
7.	123 NW 13th Street, Suite 310			7A S	_
	Boca Raton, FL 33432			CRI	" <b>"</b>
		ress of	Principal Office)	TO A	
	If limited liability company is a manager-mana	_	• • •	2010 MAR -1 PM : SECRETARY OF S TALLAHASSEE, FL	
9.	The name and usual business addresses of the n Beeman Studio City, LLC	nanag	ing members or managers	are as following 2:	
	Beeman Studio City, LLC			<b>&gt;</b>	_
	12031 Ventura Blvd, Suite 3				_
	Studio City, CA 91604				_
the	Attached is an original certificate of existence, no more than jurisdiction under the law of which it is organized. (A photon slation of the certificate under oath of the translator must be	соруі	s not acceptable. If the certificate i		ecords in
11	. Nature of business or purposes to be conducte	d or p	promoted in Florida:	investments	_
	Signature of a member or ar (In accordance with section 608.408) an affirmation under the penalties of	3), F.S. perjur	, the execution of this document con that the facts stated herein are true	nstitutes	_•
			hapiro ame of signee	<del></del>	

### 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 3x a Charm, LL		d Liability Company is:		
If name unavai	lable, the alt	ernate name to be used in the state of Florida is:	•••	
2. The name a	nd the Florid	la street address of the registered agent and office are:	201 S TAT	
	NRAI Servi	ces, inc.	2010 HAR SECRET TALLAHI	٦٦)
	2731 Exec	(Name) utive Park Drive, Suite 4	-1 P	
		Florida Street Address (P.O. Box NOT ACCEPTABLE)	PH 2: 03 OF STATE E, FLORIDA	
	Weston	FL 33331 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. NRAI Services, Inc.

By: (Signature)

Christian Eubanks - Asst. Secretary

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

# Delaware

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#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "3X A CHARM, 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 TWENTY-THIRD DAY OF FEBRUARY, A.D. 2010.

4778669 8300

100188191

AUTHENT CATION: 7830451

DATE: 02-23-10

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