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EXAMINER



ACCOUNT NO. : I2000000195

REFERENCE :

AUTHORIZATION :

COST LIMIT :

ORDER DATE : July 9, 2010

ORDER TIME : 9:35 AM

ORDER NO. : 441661-010

CUSTOMER NO: 7494108

FOREIGN FILINGS

NAME: THE ELEVEN AGENCY, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY

PLAIN STAMPED COPY

_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap -- EXT# 2951

EXAMINER:

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

		6	- Cope
I COMPLIANCE WITH SECTION IMITED LIABILITY COMPANY TO:		ES, THE FOLLOWING IS SUBMITTED TO REGISTER STATE OF FLORIDA:	A FORE
The Eleven Agency, Ll	LC		<i>y</i>
(Name of Foreign Limited L	iability Company; must inclu	de "Limited Liability Company," "L.L.C.," or "LLC."	7
		se of transacting business in Florida and attach a copy mate name. The alternate name must include "Limited	
Delaware	3	20-0260897	
(Jurisdiction under the law of wh company is organized)	ich foreign limited liability	(FEI number, if applicable)	
9/26/2003	5	Perpetual	
(Date of Organiza		(Duration: Year limited liability company will cea exist or "perpetual")	se to
(Date f (See sect	irst transacted business in Flo tions 608.501 & 608.502 F.S.	rida, if prior to registration.) to determine penalty liability)	
15375 Barranca Parkw	ay, Suite B 101, Irvir	ne, CA 92618	
	(Street Address	of Principal Office)	
	(0.11011,122,200		
If limited liability company	is a manager-managed	company, check here 🔀	
The name and usual busine	ss addresses of the mana	nging members or managers are as follows:	
See Attached Schedule			
			
Attached is an original certificate of jurisdiction under the law of which islation of the certificate under oath	n it is organized. (A photocopy	ays old, duly authenticated by the official having custody is not acceptable. If the certificate is in a foreign languag itted.)	ofrecords e, a
Nature of business or purp	oses to be conducted or	promoted in Florida:	
Marketing			
	Aug 7 2		·
Signatur	V 0 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	horized representative of a member.	
(In accorda	ance with section 608.408(3), F.S	S., the execution of this document constitutes	
6 ,	1 7 7	ry that the facts stated herein are true,)	
	Typed or printed	QQCQ	
	ryped or printed;	ligitie of signee	

		Schedule A	
	for Application B	for Application By Foreign Limited Liability Company	
	For Authorizat	For Authorization to Transact Business In Florida	
		101	
		The Eleven Agency, LLC	
	Table of the state		
9. The name and usual business ad	dresses of the managing me	ess addresses of the managing members or managers are as follows:	
Title	Name	Address	
Manager	David Treadway	2475 Washington Boulevard, Ogden, UT 84401	
Manager	Deborah E. Zangara	437 Madison Avenue, New York, NY 10022	
Manager	Graeme S. Bradley	15375 Barranca Parkway, Suite B 101, Irvine, CA 92618	
Manager	Jennifer L. Schatzman	437 Madison Avenue, New York, NY 10022	
Manager	Thomas L. Harrison	437 Madison Avenue, New York, NY: 10022.	
Manager	Timothy Regan	15375 Barranca Parkway, Suite B 101, Irvine, CA 92618	

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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	e of the Limited Liability C	ompany is:
The Elever	Agency, LLC	
If name unav	vailable, the alternate name	to be used in the state of Florida is:
2. The name	and the Florida street add	ress of the registered agent and office are:
	Corporation Service	е Сотрапу
		(Name)
	1201 Hays Street	
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)
	Tallahassee	FL 32301
		City/State/Zip
liability comp agent and agr relating to the obligations of	oany at the place designated ree to act in this capacity. I e proper and complete perfo f my position as registered a	and to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as registered further agree to comply with the provisions of all statutes armance of my duties, and I am familiar with and accept the agent as provided for in Chapter 608, Florida Statutes.
BY:	on Service Company One Skylature)	Jane S. Krayer, Assistant VP

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "THE ELEVEN AGENCY, 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 NINTH DAY OF JULY, A.D. 2010.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "THE ELEVEN AGENCY, LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF SEPTEMBER, A.D. 2003.

3709062 8300

100727667

DATE: 07-09-10

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

AUTHENTICATION: 8102920