Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000160320 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

**Snter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

Foreign Limited Liability Company Great Isabel Island Media, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

G. MCLEOD

JUN 17 2011

EXAMINER

6/16/2011

COVER LETTER

10:	Registration Section Division of Corporations	
SUBJI	ECT: Great Isabel Island Media, LLC	Name of Limited Liability Company
		iability Company for Authorization to Transact Business in Florida," Certificate of a above referenced foreign limited liability company to transact business in Florida
Please	retirn all correspondence concarning this	matter to the following:
	Iyana Money, Paralegal	Name of Person
		14mms of Lethon
	Berkowitz, Trager & Trager, LL	
		Firm/Company
	8 Wright Street	
		Address
	Westport, CT 06880	
	Westport, CT Woody	City/State and Zip Code
	clivekabatznik@gmail.com E-mail address	s: (to be used for future annual report notification)
Por fu	rther information concerning this matter, p	lease call:
	Ivana Money	at (203) 291-8224
	Name of Person	Arca Code & Daytime Telephone Number
	MAILING ADDRESS: Division of Corporations	STREET ADDRESS: Division of Corporations
	Registration Section	Registration Section
	P.O. Box 6327 Taliahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclo	osed is a check for the following am	ount:
]	\$125.00 Filing Fee \$130.00 Filing Certificate of	Peo & \$\bigcip\\$155.00 Filing Peo & \$\bigcip\\$160.00 Filing Peo, Certificate

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPLIANT OF TRANSACTELISMESS IN THE STATE OF FLORIDA.

1. Great Isabel Island Media, 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.")	:
2 Delaware 3, 45-2483204	
(Jurisdiction under the law of which foreign limited Hability (FEI number, if applicable) company is organized)	
4. June 2, 2011 5. Perpetual	
(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, 1900 Glades Road, Suite 435	
Boca Raton, FL 33481	
(Street Address of Principal Office)	
8. If limited liability company is a manager-managed company, check here	
7° -	No.
Ryan Brant, 231 Coral Lane, Palm Beach, FL 33480	•••
Clive Kabatznik, 1900 Glades Road, Suite 435, Boca Raton, FL 33431	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction, under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under cath of the translator must be submitted.)	,
11. Nature of business or purposes to be conducted or promoted in Floridz:	
game licensing, development and distribution	
le Capo	
Signature of a member of 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree follows as provided for in s.817.155, F.S.)	
Clive Kabatznik	
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 POLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

ompany is:
the state of Florida is:
ess of the registered agent and office are:
•
(Name)
(lie 435 Address (P.O. Box <u>NOT</u> ACCEPTABLE)
FL 83431 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)

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GREAT ISABEL ISLAND MEDIA, 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 THIRTEENTH DAY OF JUNE, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

DATE: 06-13-11