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(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

T. CLINE
JAN 17 2012
EXAMINER

Law Offices

Karp & Langerman, P.C.

Milford Place Corporate Center

185 Plains Road

Milford, Connecticut 06461

JOEL C. KARP
jkarp@karp-langerman.com

LAWRENCE LANGERMAN
llangerman@karp-langerman.com

NOEL T. LANGERMAN
nlangerman@karp-langerman.com

MILFORD (203) 876-0606
WESTPORT (203) 866-5892
FAX (203) 876-0768

January 9, 2012

Division of Corporations
Registrations Section
PO Box 6327
Tallahassee, FL 32314

Re: Application for Authority to Transact Business &
Designation of Agent

Dear Sir or Madam:

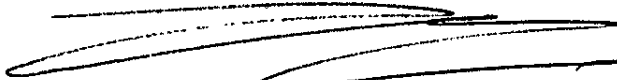
Enclosed is the following:

1. Application By Foreign Limited Liability Company
Authorization to Transact Business in Florida,
2. Certificate of Designation of Registered
Agent/Registered Office,
3. Original Certificate of Legal Existence, and
4. Check for \$125 representing the filing fees.

Please file the Application for Authority to Transact
Business and the Certificate of Designation of Registered Agent.

Please call me if you have any questions.

Very truly yours,



Noel Langerman

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2012 JAN 13 AM 10:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Performance Event Team, LLC

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:

Noel Langerman

Name of Person

Karp & Langerman, P.C.

Firm/Company

185 Plains Road, Suite 209E

Address

Milford, CT 06461

City/State and Zip Code

SSADLER@performancesvc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Noel Langerman

Name of Person

at (203)

876-0606

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

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

2012 JAN 13 AM 10:48
TALLAHASSEE FLORIDA
SECRETARY OF STATE

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Performance Event Team, 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. Connecticut

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 45-4016007

(FEI number, if applicable)

4. November 2, 2011

(Date of Organization)

5. Perpetual

(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. 111 Court Street

New Haven, CT 06511

(Street Address of Principal Office)

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:

Steven B. Sadler

111 Court Street

New Haven, CT 06511

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 oath of the translator must be submitted.)

**11. Nature of business or purposes to be conducted or promoted in Florida: Any lawful purpose
purpose for which limited liability companies may be formed.**


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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Steven B. Sadler

Typed or printed name of signee

2012 JAN 13 10:10 AM
RECEIVED
FLORIDA
STATE
DEPARTMENT

FILED

**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:

Performance Event Team, 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:

Steven B. Sadler

(Name)

141 Crandon Blvd. #440

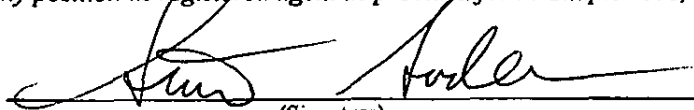
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Key Biscayne

FL 33149

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.


(Signature)

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

2012 JAN 13 PM 1:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof,
DO HEREBY CERTIFY, that articles of organization for

PERFORMANCE EVENT TEAM, LLC

a domestic limited liability company, were filed in this office on November 02, 2011.

Articles of dissolution have not been filed, and so far as indicated by the records of this office such
limited liability company is in existence.



Secretary of the State

Date Issued: January 09, 2012

