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(Re	equestor's Name)			
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D. BRUCE

MAY **0 9** 2012

EXAMINER

COVER LETTER

то:	Registration Section Division of Corporations		
SUBJI	ECT: #Hantic Coast Media Group LLC Name of Limited Liability Company		
	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Floridance, and check are submitted to register the above referenced foreign limited liability company to transact business.		
Please	return all correspondence concerning this matter to the following:		
	John Gerretk Name of Person		
	Name of Person		
	Atlantic Coast Media Group Firm/Company 499 Washington Blvd - 15th Ploor		
	Firm/Company '		
	499 Washington Blvd - 15th Ploor		
	Address		
	JUSLY City, NT 07310 City/State and Zin Code		
	City/State and Zip Code		
	John a atlantic coast media. con E-mail address: (to be used for future annual report notification)	12	
	E-mail address: (to be used for future annual report notification)	Y.	1
For fur	ther information concerning this matter, please call:	HAY -8	
	E-mail address: (to be used for future annual report notification) ART ART ART ART ART ART ART AR	PH 12: 84	
	Name of Person Area Code & Daytime Telephone Number	60 0	
		477	
	Division of Corporations Registration Section Division of Corporations Registration Section		
	P.O. Box 6327 Clifton Building		
	Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301		
Enclo	sed is a check for the following amount:		
	\$125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certified Copy} \text{S160.00 Filing Fee, Certified Copy}		

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

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. Atlantic Coast Media Group 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. State of New Jersey (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
4. 03/04/05 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6. May 1, 2012 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
- 499 Washington Rlvd - 15th Floor
Jersey City, NJ 07310 (Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here 2 9. The name and usual business addresses of the managing members or managers are as follows: Andrew Surwilo - Same as above Example 1
Thomas Shipley - same as above
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:
Direct response marketing-selling proprietary personal care products.
Signature of a prember 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.)
Andrew Surwilo

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:		
Atlantic Coast Media Group		
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:		
Crescensia Velarguez	— \$	
13557 S. W. 40 th Circle Florida Street Address (P.O. Box NOT ACCEPTABLE)	AR.	12 Hay -
Ocala FL 34473	Y OF	
City/State/Zip	STATE PRIDA	

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)

STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY SHORT FORM STANDING

ATLANTIC COAST MEDIA GROUP, LLC

0600266748

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named Virginia Foreign Limited Liability Company was registered by this office on April 12, 2006.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Capitol Corporate Services Inc 14 Scenic Drive Dayton, NJ 08810

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Certification# 124707434

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 27th day of April, 2012

Andrew P Sidamon-Eristoff
State Treasurer

Verify this certificate at https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp