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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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.

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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

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

Foreign Limited Liability Company Universal Parks & Resorts Management Services, LLC

Certificate of Status	U
Certified Copy	1
Page Count	05 U
Estimated Charge	\$155.00

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1/10/2013 05/02/5013 13:01 To:

Division of Corporations

Fax Number : (850)617-6383

Prom:

Account Name : C T CORPORATION SYSTEM

Account Number : PCA000000023 : (850)322-1092 1 (850)878-5368 Fax Number

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

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Foreign Limited Liability Company Universal Parks & Resorts Management Services, LLC

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TRANSMISSION VERIFICATION REPORT

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT, Universal Parks & Resorts Management Services	LC
Name of Limited Liability Company	
The enclosed "Application by Foreign Limited Liability Company for Authorization to Trunsact Bus Existence, and check are submitted to register the above referenced foreign limited liability company	ness in Florida," Cartificate of to transact business in Florida
Please return all correspondence concerning this matter to the following:	
GABRIELA KORNZWEIG	·
Name of Person	
NBCUNIVERSAL	
Firm/Company	
100 UNIVERSAL CITY PLAZA	
Address	
UNIVERSAL CITY, CA 91608	
City/State and Zip Code	
walter.daley@nbcuni.com B-mail address: (to be used for finitive annual report notification)	
E-man address: (to be used for thinge annual report notification)	
For further information concerning this matter, please call:	
Gabriela Kornzwelg st (818) 777-8636	
Name of Person Area Code & Daytime Telephone Number	
MAH ING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 STREET ADDRESS: Division of Corporations Registration Section Clifton Building	
Tallahassoo, FL 32314 2661 Executive Center Circle Tallahassoo, FL 32301	
Enclosed is a check for the following amount: []\$125.00 Filing Fee & []\$160.00 Filing Fee	ng Fee, Certificate Certified Copy
	1

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

IN COMPLIANCE WITH SECTION 604503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1 Universal Parks & Resorts Management Services 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 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 5. PERPETUAL 4 9/4/2009 (Date of Organization) (Duration: Year limited liability company will cease to exist or "porpetual") (Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 100 UNIVERSAL CITY PLAZA UNIVERSAL CITY, CA 91608 (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: RICHARD COTTON, NBCUNIVERSAL, 30 ROCKEFELLER PLAZA, NEW YORK, NY 10112 STUART EPSTEIN, NBCUNIVERSAL, 30 ROCKEFELLER PLAZA, NEW YORK, NY 10112 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 eath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Plorida: ENTERTAINMENT Signature of a member or ar authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this obcurrent constitutes an offirmation under the penalties of perjury that the fucis stated herein are true. I aim sware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in 3.817.155, F.S.) GABRIELA KORNZWEIG, AUTHORIZED REPRESENTATIVE

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	Lin	iited	Liabilit	y (Company	is:	
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Universal Parks & Resorts Management Services LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Plorida street address of the registered agent and office are:

CT Corporation System (Name) 1200 S Pine Island Road
Florida Street Address (P.O. Box NOTACCEPTABLE)

Plantation FL 83324

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 statues 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 688, Florida Statutes.

<u>Assistant Secretary</u>

\$ 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 "UNIVERSAL PARKS & RESORTS
MANAGEMENT SERVICES LLC" IS DOLY 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
NINTE DAY OF JANUARY, A.D. 2013.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

4727951 8300

130029663

You may verify this cortificate online at corp.delaware.gov/authver.ehtml

AUTHENTY CATION: 0132016

DATE: 01-09-13