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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	· · · · · · · · · · · · · · · · · · ·
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Office Use Only



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C. LEWIS

MARS, 2013

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 18, 2013

STUART C. WOODWARD / TUSK VIDEO LLC 1165 19TH STREET VERO BEACH, FL 32960

SUBJECT: TUSK VIDEO LLC Ref. Number: W13000009831

We have received your document for TUSK VIDEO LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any further questions concerning your document, please call (850) 245-6051.

Letter Number: 813A00003945

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

,

www.sunbiz.org

CB2E027 (9/10)

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: TUSK VIDED 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:			
STUART C WOODWARD Name of Person			
TUSK VIDEO LLC Firm/Company			
1165 19TH ST.			
Address			
VERO BEACH FL 32960 City/State and Zip Code			
City/State and Zip Code			
Stvart. Woodward a celadon reef.com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
SNARTC WOODWARD at (772) 617-0010 Name of Person Area Code & Daytime Telephone Number			
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301			
Enclosed is a check for the following amount: \$\Begin{array}{cccccccccccccccccccccccccccccccccccc			

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

IN COMPLIANCE WITH SECTION 608,503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

IMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
IC
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.")
DELANIADE 3 46-1593477
JELAWARE (Jurisdiction under the law of which foreign limited liability company is organized) 3. 46-1593477 (FEI number, if applicable)
4. DECEMBER 11, 2012 5. PERPETUAL (Date of Organization) 5. PERPETUAL (Duration: Year limited liability company will cease to exist or "perpetual")
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
NO "".
1. 1165 19 TH ST
VERO BRACH FL 32960 (Street Address of Principal Office)
(Street Address of Principal Office)
3. 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:
STURET CLIDOWARD 1165 19 I'ST VERO BENEH FL 32960
JAMES HURIGHT) 3030 GRAW BAY BLUD. UNIT 376
JAMES H WRIGHT 3030 GRAW BAY BLVD, UNIT 376 LUANNE SWRIGHT LONGBOAT KEY FL 34228
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 ranslation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: Develop and MARGET A RANGE OF GLOBAL SURJECULARE VIDEO SOLUTIONS, BOTK MOBILE AND FIXED.
A RANGE OF GLOBAL SURVEILLANCE VIDED SOLUTIONS, BOTH MOBILE AND
FIXED.
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.)
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:	
TUSK VIDEO 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:	
STVART (WOODWARD) (Name)	01V15
Florida Street Address (P.O. Box NOT ACCEPTABLE)	SECRETARY OF SECRETARY OF CORPO
VEROIBEACH FL 32960 City/State/Zip	H 8: 46

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.

Summe.
(Signature)

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

Delaware

PAGE

The First State

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

DELAWARE, DO HEREBY CERTIFY "TUSK VIDEO 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 TWENTY-FIRST DAY OF FEBRUARY, A.D. 2013.

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

5256363 8300

130210199

AUTHENTY CATION: 0232676

DATE: 02-21-13

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