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5/29/13

NAME:

TRES PISTOLEROS DEVELOPMENT LLC

TYPE OF FILING: APPLICATION

COST:

125.00

RETURN: PLAIN COPY PLEASE

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**AUTHORIZATION: ABBIE/PAUL HODGE** 

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#### **COVER LETTER**

aud rece.	Tres Pistoleros Development LLC						
SUBJECT:	Name of Limited Liability Company						
	d "Application by Foreign Limited I nd check are submitted to register th						
Please return	all correspondence concerning this	matter to the	e following:				
	Alice Y. Ohashi, Sr. Paralegal					**** **** ii	
		N	ame of Person				ω ∡
	O'Melveny & Myers LLP					THE STATE OF THE S	3 MAY 29 AM
		Fi	ігт/Сотрану			- SE	90 ( 320 E
	1999 Avenue of the Stars, Suit	e 700				110	29 M 9 3
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	Los Angeles, CA 90067					I.	
		City/S	tate and Zip Code				
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For further is	nformation concerning this matter, p	lease call:					
Ali	ice Y. Ohashi		310	246-67	36		
	Name of Person	Are	a Code & Daytime	Telephone	Number		
Div Reg P.O	ALING ADDRESS: vision of Corporations gistration Section D. Box 6327 lahassee, FL 32314	Division Registr Clifton 2661 F	ET ADDRESS: on of Corporations ration Section Building Executive Center Ci assee, FL 32301	rele	,		
	is a check for the following an \$125.00 Filing Fee		□ \$155.00 Filii Certified Co		□ \$160.00 Filing of Status & Cen		

## 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 COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Tres Pistoleros Development LLC	
1. Tres Pistoleros Development 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 Flor consent of the managers or managing members adopting the alternate name. The alternate name r Company," "L.L.C," "LLC,")	
2. <u>Delaware</u> 3. 46-2856829	
2. Gurisdiction under the law of which foreign limited liability company is organized)  3. 46-2856829  (FEI number, if	applicable)
4. 5/21/2013 5. perpetual	
(Date of Organization) (Duration: Year limited liab exist or "perpetual")	oility company will cease to
6,	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7 605 Third Ave., 12th Floor, New York, NY 10158	The second second
/·	29
(Street Address of Principal Office)	
(Sirect Address of Principal Office)	
8. If limited liability company is a manager-managed company, check here 🔲 👚	S 9.
9. The name and usual business addresses of the managing members or manager	<b>一 </b>
Ul Rey Holdings LLC, 605 Third Ave., 12th Floor, New York, NY 10158	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by th	a official basing and wheel as welvio
the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certifica	
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:	
Development, acquisition, production of English language audiovisual programs	
	*
Signature of a member or an authorized representative of a	
(In accordance with section 608.408(5), F.S., the execution of this document constitutes at penalties of perjury that the facts stated herein are true. I am aware that any false infor document to the Department of State constitutes a third degree felony as provide	nnation submitted in a
Scott M. Sassa	
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.

	of the Limited Liab Development LLC	ility Company is:		
If unavailable,	, the alternate to be	used in the state of Florida is:	**************************************	
2. The name a	and the Florida stree	et address of the registered agent and office are:	A.E. G.	13 MAY 29
		C T Corporation System	ASS	29
		(Name)		e M
		1200 South Pine Island Road	ELOST.	(ည (ည
	Floric	a Street Address (P.O. Box NOT ACCEPTABLE)	- 3F	<u> </u>
	Plantation	FL 33324 City/State/Zip	<del>-</del>	

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.

By: (Signature) Donald Boadway
Assistant Secretary

\$ 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 1

### The First State

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

DELAWARE, DO HEREBY CERTIFY "TRES PISTOLEROS DEVELOPMENT 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-NINTH DAY OF MAY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TRES

PISTOLEROS DEVELOPMENT LLC" WAS FORMED ON THE TWENTY-FIRST DAY

OF MAY, A.D. 2013.

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

13 MAY 29 AM 9: 97

5338458 8300

130680112

AUTHENTY CATION: 0465926

DATE: 05-29-13

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