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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

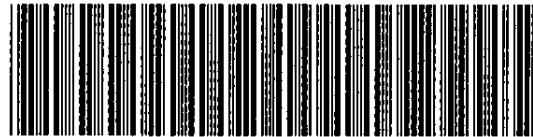
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2014 MAR 28 PM 4:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR - 1 2013

T. HAMPTON

1214-7585

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pro Productions, 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:

Chris Sidelinger

Name of Person

Pro Productions, LLC

Firm/Company

1360 Clayton Dr

Address

Deltona, FL 32725

City/State and Zip Code

cs@prochemsource.com

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

For further information concerning this matter, please call:

Chris Sidelinger

Name of Person

at (407)

558-7321

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 5, 2014

CHRIS SIDELINGER
1360 CLAYTON DR
DELTONA, FL 32725

SUBJECT: PRO PRODUCTIONS, LLC
Ref. Number: W14000007588

We have received your document for PRO PRODUCTIONS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Tammy Hampton
Regulatory Specialist III

Letter Number: 814A00002621


IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Professional Productions LLC
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

6. 1360 Clayton Dr.
Deltona, FL 32725
(Mailing Address)

~~1360~~ Chris Sidelinger mgr
1360 Clayton Dr.
Deltona, FL 32725


Signature of an authorized person

Chris Sidelinger
Typed or printed name of signee

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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:

Pro Productions LLC

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

Professional Productions LLC

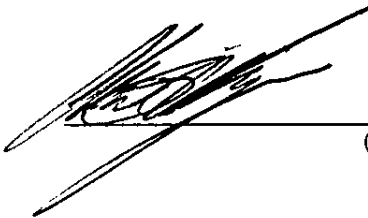
2. The name and the Florida street address of the registered agent and office are:

Chris Sidelinger
(Name)

1360 Clayton Dr.
Florida Street Address (P.O. Box NOT ACCEPTABLE)

Deltona FL 32725
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 605, 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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 MAR 28 PM 4:41

FILED

**ISLAND OF NEVIS
OFFICE OF THE REGISTRAR OF COMPANIES**

CERTIFICATE OF FORMATION

I HEREBY CERTIFY that

Pro Productions, LLC


**is duly formed and has filed articles of organization under the provisions of the Nevis
Limited Liability Company Ordinance 1995, as amended, on**

7th November, 2013

**Given under my Hand & Seal at Charlestown
this 7th day of November, 2013**



YNGar5ja



Registrar of Companies

No. L 15729