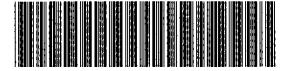
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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
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T. BROWN

COVER LETTER

TO:

Registration Section

Division of C	Corporations	
	7	V-11- 770
SUBJECT:		Media, LLC.
	Name	ne of Limited Liability Company
The enclosed "Applica Existence, and check a	ation by Foreign Limited Liabi are submitted to register the ab-	bility Company for Authorization to Transact Business in Florida," Certificate o bove referenced foreign limited liability company to transact business in Florida
Please return all corres	spondence concerning this mat	atter to the following:
	Jaçque	eline McPherson
		Name of Person
···	Jackso	on & McPherson, L.L.C.
		Firm/Company
	1010 Co	ommon St., Suite 1800
	2010 00	Address
	New Orl	leans, LA 70112
		City/State and Zip Code
	cforste	er@jacksonmcpherson.com
	E-mail address:	: (to be used for future annual report notification)
		·
For further information	n concerning this matter, pleas	ise call:
		•
	Cheryl M Forster	
	Name of Contact Person	Area Code Daytime Telephone Number
MAILING A	ADDRESS:	STREET ADDRESS:
Division of C		Division of Corporations
Registration S		Registration Section
P.O. Box 632	-	Clifton Building
Tallahassee,	FL 32314	2661 Executive Center Circle
		Tallahassee, Ft. 32301
Enclosed is a chec	k for the following amou	unt:
□ \$125.00 F		ng Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate
	Certificate of	<u> </u>

JACKSON & MCPHERSON, L.L.C.

ATTORNEYS AT LAW

RADER JACKSON
JACQUELINE MCPHERSON
CRIS R. JACKSON
ANNE E. RAYMOND

SUITE 1800 1010 COMMON STREET NEW ORLEANS, LOUISIANA 70112-2401 TELEPHONE (504) 581-9444 FACSIMILE (504) 588-2888

July 25, 2014

VIA UPS

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re:

Poet Media, L.L.C., Poet Theatricals Marine, L.L.C. and

Corporate Entertainment Production, L.L.C.

Dear Sir or Madam:

Enclosed please find the following for each limited liability company referenced above:

- 1. Cover Letter.
- 2. Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida.
- 3. Certificate of Designation of Registered Agent/Registered Office.
- 4. Certificate of Organization from the Louisiana Secretary of State.

I also enclose our check for \$390.00.

Please file the attached in your records and send the undersigned proof of filing.

Thank you very much.

Very truly yours,

Cheryl M. Forster Legal Assistant to

Jacqueline McPherson

cmf Enclosure

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

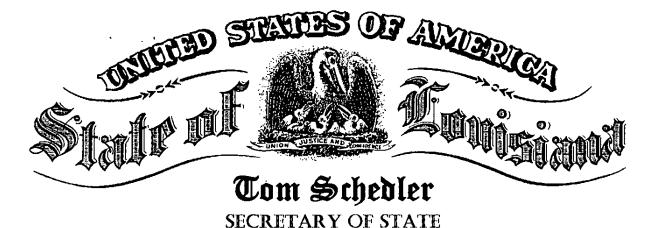
IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A

FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Poet Media, 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. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") Louisiana (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) Similation that (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 1382 W. McNab Road Fort Lauderdale, FL 33309 (Street Address of Principal Office) 1382 W.', McNab Road, Fort Lauderdale, FL 33309 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Michael McPherson, Sole Member 8. 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 pertificate under oath of the translator must be submitted) Signature of an authorized person (In accordance with section 605,0203, 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.) Michael McPherson 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:
Poet Media, 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:
Michael McPherson
(Name)
1382 W. McNab Road
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Fort Lauderdale FL 33109 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) (Signature) S 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



As Secretary of State, of the State of Louisiana, I do hereby Certify that

the Articles of Organization of

POET MEDIA, LLC

Domiciled at NEW ORLEANS, LOUISIANA,

Were filed in this Office and a Certificate of Organization was issued on January 29, 2008,

I further certify that no Certificate of Dissolution has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

July 18, 2014

Certificate ID: 10510111#7Q83

To validate this certificate, visit the following web site, go to Commercial Division, Certificate Validation, then follow the instructions displayed.

www.sos.louisiana.gov

Secretary of State
SSP 36652217K