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T. BROWN

COVER LETTER

TO:	Registration Section Division of Corporat	ons			
SUBJ	ECT:	Corporate En	tertain	ment Production	, L.L.C.
		Nar	me of Limite	d Liability Company	
The er Existe	nclosed "Application by F nce, and check are submi	oreign Limited Lia ted to register the a	bility Comp above refer	pany for Authorization to enced foreign limited liab	Transact Business in Florida," Certificate of oility company to transact business in Florida.
Piease	return all correspondence	concerning this m	atter to the	following:	
		Jacquelin	ne McPhe	erson	
	, 		Na	ame of Person	
		Jackson &	McPhers	son. LLC	
				rm/Company	
		1010 Commo	n Stree	et, Suite 1800	
				Address	
		New Orlean	s, LA	70112	
			City/St	ate and Zip Code	
		cforster@j	acksonm	cpherson.com	
		E-mail address	: (to be used	for future annual report no	ification)
For fur	ther information concerni	ng this matter, plea	se call;		
	Ob a seed of			at (504) 2	262-8767
	Cheryl M. Name	of Contact Person		at ()Area Code	Daytime Telephone Number
	MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division Registra Clifton I 2661 Ex	T ADDRESS: of Corporations tion Section Building ecutive Center Circle see, FL 32301	
Enclo	sed is a check for the	following amou \$130.00 Filin Certificate of	g Fee &	☐ \$155.00 Filing Fee & Certified Copy	□ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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.

Lalso 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

emf 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: Corporate Entertainment Production. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," (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) n.a. (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) Fort Lauderdale, FL 33309 1382 W. McNab Road, Unit (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 certificate 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. am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in 5.817.155, 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:
Corporate Entertainment Production, L.L.C.
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 McNab Road, Unit - 2 Florida Street Address (P.O. Box NOT ACCEPTABLE)
Fort Lauderdale FL 33309
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.

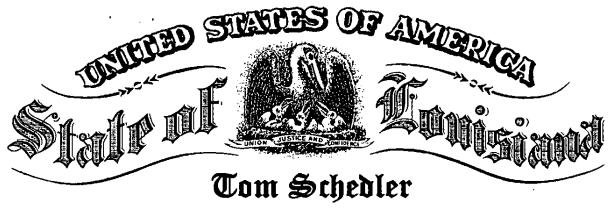
(Signature)

\$ 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

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

the Articles of Organization of

CORPORATE ENTERTAINMENT PRODUCTION, L.L.C.

Domiciled at NEW ORLEANS, LOUISIANA,

Were filed in this Office and a Certificate of Organization was issued on May 12, 2006,

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: 10510113#PVA42

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 36184368K