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SECRETARY OF STATE
PART AHASSEE, FRORIDA

AUG 26 2014

### **COVER LETTER**

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SUBJECT:	Plu	n Editor	ial	LLC				
JOHN _	··· <del>-</del>			d Liability Company	,			
		reign Limited Liabiled to register the abo						
Please return al	Il correspondence	concerning this mat	er to the	following:				
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		•	N	ame of Person				
		Plun	Ed	itorial im/Company	LLC			
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	5703	Red Bug	Lak	e Rd.	suite	e 530		
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For further info	rmation concernin	g this matter, please	call:				要別	ج <u>ر</u> بي
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	Name o	of Contact Person		Area Code	Da	ytime Telephone	Number	
Division Regist P.O. B	ANG ADDRESS: on of Corporations ration Section Box 6327 assee, FL 32314		Division Registra Clifton 2661 Ex	et ADDRESS: n of Corporations ation Section Building xecutive Center Cir ssee, FL 32301	rele			
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### 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:
1. Plum Editorial LLC  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LL.C.," or "LLC.")
Plum Editorial L.L.C.
(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.")
2. Worcester County, MA 3. 001105045
2. Worcester County, MA  (Jurisdiction under the law of which foreign limited liability company is organized)  3. OO 1105045  (FEI number, if applicable)
4N/A
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. (Home) 984 English Town Ln Apt. 100
5. (Home) 984 English Town Ln Apt. 100  Winter Springs FL 32708  (Street Address of Principal Office)  6. 5703 Red Bug Lake Rd STE. 530 %
(Street Address of Principal Office)
6. 5 105 Rea Bug Lake Ra STE 530 N
Winter Springs FL 32708 FG TO (Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Susan Shalhoub, Principal Dwner
<b>,</b>
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)
Shalhout
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.)
Susan Shalhoub
Typed or printed name of signee

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

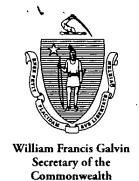
PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:			
Phim Editorial LLC			
If unavailable, the alternate to be used in the state of Florida is:			
Plum Editorial L.L.C.			<del></del>
2. The name and the Florida street address of the registered agent and office are:			
Susan Shalhoub	ec	SECRETARY SECRETARY	2
(Name)	<del>-</del>	三世 2000年 20	س سب
(HOME) 984 English Town In Apt. 100	.:	ARY OF STATE ASSEST FLOSION	n T
Florida Street Address (P.O. Box NOT ACCEPTABLE)		752	<u> </u>
Winter Springs FL 32708 City/State/Zip		품등	ယ ဧာ
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)



## The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02133

August 14, 2014

#### TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of Limited Liability Company was filed in this office by

#### PLUM EDITORIAL LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on April 17, 2013.

I further certify that said Limited Liability Company has not filed a certificate of cancellation; that said Limited Liability Company has not been administratively dissolved; and that, so far as appears of record, said Limited Liability Company has legal existence.



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

Francis Galecin

Processed By:sam