

M14 0 00007002

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

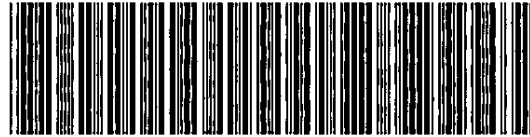
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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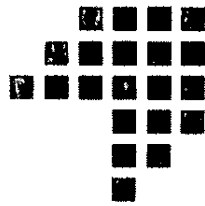


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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**DIGITAL  
FILM  
ACADEMY**

August 28 , 2014

Re: Application to Conduct Business in Florida

Enclosed please find:

Cover Letter Form

Application by Foreign Limite Liability Company for Authorization to  
Transact Business in Florida

Certificate of Designation Of Registered Agent/Registered Office

NYS Department of State Division of Corporation Notice of Corporation –  
Less than 90 days old

NYS dba Business Certificate

Check #17350 Payable to Florida Department of State in the amount of  
\$160.00

Please feel free to contact me with any questions regarding this matter.

Best regards,

Patrick DiRenna  
President  
Digital Film Academy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 10, 2014

PATRICK DIRENNA  
630 9TH AVE SUITE 901  
NEW YORK, NY 10036

SUBJECT: THE DIGITAL FILM CENTER, LLC  
Ref. Number: W14000055241

We have received your document for THE DIGITAL FILM CENTER, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of 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.

Justin M Shivers  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 414A00019305

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: The Digital Film Center, LLC/Digital Film Academy**  
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:

**Patrick DiRenna**

Name of Person

**The Digital Film Center, LLC/Digital Film Academy**

Firm/Company

**630 9th Ave Suite 901**

Address

**New York, NY 10036**

City/State and Zip Code

**patrick@digitalfilmacademy.edu**

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

For further information concerning this matter, please call:

**Patrick DiRenna**

Name of Contact Person

**at (212) 333-4013**

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

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

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

1. The Digital Film Center 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.")

2. New York State

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 13-4200222

(FEI number, if applicable)

4. N/A

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

5. 3030 N. Rocky Point Dr. Suite 150A

Tampa, Florida 33607

(Street Address of Principal Office)

6. 630 9th Ave - Suite 901

New York, NY 10036

(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:


Patrick DiRenna - President

428 W. 47th ST #5E

New York NY 10036

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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. 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.)

Patrick DiRenna

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:

**The Digital Film Center, LLC/Digital Film Academy**

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:

**Registered Agents, Inc.**

(Name)

**3030 N. Rocky Point Dr Ste 150A**

Florida Street Address (P.O. Box NOT ACCEPTABLE)

**Tampa**

**FL**

**33607**

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.*

**Dan Keen - President**

(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

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**State of New York**  
**Department of State** } ss:

I hereby certify, that THE DIGITAL FILM CENTER LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 12/10/2001, and that the Limited Liability Company is existing so far as shown by the records of the Department.



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TALLAHASSEE, FLORIDA

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*WITNESS my hand and the official seal  
of the Department of State at the City of  
Albany, this 15th day of September two  
thousand and fourteen.*

*Anthony Scardino*

Executive Deputy Secretary of State