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(Re	equestor's Name)	<u></u>
(Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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COVER LETTER

	gistration Section vision of Corporations					
SUBJECT:	Generator Studi	o, LLC				
SUBJECT		ame of Limited Liability (Company			-
	d "Application by Foreign Limited Li nd check are submitted to register the					
Please return	n all correspondence concerning this	matter to the following:				
	Thomas J Pro	ebstle				
		Name of Perso	on			
	Generator Stu	dio, LLC				
		Firm/Compan	y			
	1701 McGee S	St, Suite 60	0(
		Address	<u> </u>			
	Kansas City, N	10 64113				
		City/State and Zip	Code		- · · ·	
	tom@generato	rstudio.cor	n			
	E-mail addre	ss: (to be used for future a	annual repo	rt notification)		-
For further is	nformation concerning this matter, pl	ease call:				
Т	om Proebstle	at (81	16 ,	333-6	527	
	Name of Contact Person	inAr	ea Code	Daytime T	elephone Number	-
Div Reg P.C	AILING ADDRESS: vision of Corporations gistration Section D. Box 6327 llahassee, FL 32314	STREET ADDRI Division of Corpo Registration Section Clifton Building 2661 Executive Co Tallahassee, FL 32	rations on enter Circl	e		
	is a check for the following am \$125.00 Filing Fee \$130.00 Fi Certificate	ling Fee & 🔲 \$155.	.00 Filing l		160.00 Filing Fee, C f Status & Certified	

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:

TOTAL OF LEVEL DE LEVEL LE CONTROL LE CONTRO	
1. Generator Studio, LLC	
(Name of Foreign Limited Liability Company: must include "Limited Liability Company," "L.L.C.," or "LLC.")	
Generator Studios, LLC	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limite Liability Company," "L.L.C," or "LLC.")	ed
_{2.} State of Missouri 3. 27-0286871	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4. N/A	
(Date first transacted business in Florida, if prior to registration.)	2015
4704 N. O. O. I. O. I. O.O.	5 FEB
Kansas City, MO 64113	6-
(Street Address of Principal Office) 1701 McGoo Street Suite 600	2
	?
randas oity, we of the	30
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	
Tom Proebstle, Partner, 1701 McGee St, Ste 600, Kansas City, MO	
Mike Kress, Partner, 1701 McGee St,Ste 600, Kansas City, MO	
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the office 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 pranslation of the certificate under oath of the translation of the certificate under oath of the translation.	
must be submitted)	
Signature of an authorized person	
(In accordance with section 605,0203, F.S., the execution of this document conventes an affirmation under the penalties of perjury that the facts stated herein 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.)	are true

Thomas J Proebstle

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:

Generator Studio, LLC

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

Generator Studios, LLC

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

Mike O'Donnell (Name)		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	TAMPA, FL 33602	
	City/State/Zin	

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)

STATE OF MISSOURI



Jason Kander Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, JASON KANDER, Secretary of State of the STATE OF MISSOUR!, do hereby certify that the records in my office and in my care and custody reveal that

Generator Studio LLC LC0972398

was created under the laws of this State on the 2nd day of June, 2009, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 6th day of January, 2015.

Secretary of State

Certification Number: CERT-01062015-0093

