

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000048751 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : NATIONAL CORPORATE RESEARCH, LTD.

Account Number : 120000000088

: (800)221-0102

Phone Fax Number

: (800)944-6607

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

S

Foreign Limited Liability Company BLUE MAN PRODUCTIONS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

2/25/2015

(((H15000048751 3)))

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

IN COMPLIANCE WITH SECTION 80.0902, PLOKIDA STATUTES, THE POLITOWING IS SUBMITTED TO RE- FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	QISTER M
1. Blue Man Productions, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "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. Delaware 3. (Jurisdiction under the law of which foreign limited liability company is organized) (PEI number, if applicable)	
4.	2015
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. 599 Broadway, 6th Floor	FEB.
New York, NY 10012	25
(Street Address of Principal Office)	
6. 599 Broadway, 6th Floor	- <u>- 55</u> +
New York, NY 10012	_ 號間 57
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	
Chris Wink, Co-Executive CEO	
599 Broadway, 6th Floor	
New York, NY 10012	
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the chaving 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 translation of the submitted) Signature of an authorized person Un accordance with section 505 9204, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the feets stated arm aware that any false information submitted in a document to the Department of State constitutes a third degree belong as provided for in a.817.155, F.	ot anslator hereia sec true, I
Chris Wink	
Typed or printed name of signce	

(((H150000487513)))

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:	
Blue Man Productions, 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:	
National Corporate Research, Ltd., Inc.	2015 -
(Name)	器 五
155 Office Plaza Drive	第 25 日
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Tallahassee _{FL} 32301	7: 5:
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.

PANJUA Petronn Varia / Assist Sect.
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

(((H150000487513)))

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "BLUE MAN PRODUCTIONS, LLC" IS DULY
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS
OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF FEBRUARY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BLUE MAN PRODUCTIONS, LLC" WAS FORMED ON THE TWELFTH DAY OF APRIL, A.D. 2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4810354 8300

150237272

You may verify this certificate online at corn delegare, cov/authyor, ahtml

Jeffrey W. Bullock, Secretary of State

UTHENTICATION: 2139542

DATE: 02-23-15