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.

(((H15000110245 3)))



H150001102453ABCT

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 : LEGALZOOM.COM INC.

Account Number: I20010000062 Phone : (323) 962-8600 Fax Number : (323)962-3889

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

Email Address:

Foreign Limited Liability Company SIDE F/X PARTNERS LLC

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO:

Registration Section
Division of Corporations

SIDE F/X PARTNERS LLC

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:

	lme	eida Vasquez				
	Name of Person					
	Legalzoom.com, Inc.					
	Firm/Company					
	100 W. Broadway Suite 100					
	Address					
	Glendale, CA 91210					
	City/State and Zip Code					
kim@sidefxt	pand.net					
	E-mail address: (to be use	d for future annual report notifi	estion)			
For further information concerning	ng this matter, please call:					
lmelda Vasquez		323 962-	8600			
Name	of Contact Person		aytime Telephone Number			
MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Taliahassee, FL 32314	Divisio Registr Clifton 2661 E	er ADDRESS: on of Corporations ation Section Building Executive Center Circle (1880), FL 32301	•			
Enclosed is a check for the						
☐ \$125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	S155,00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy			

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

IN COMPLIANCE WITH SECTION 6050902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

OREIGN LIMITED LIABILITY COMPANY SIDE F/X PARTNERS LLC				
(Name of Foreign Limited Liability Co	mpany; must include "Limite	xl Liability Company, "L.L	C.," or "LLC.")	
name unavailable, enter alternate name adopted fi ability Company," "L.L.C," or "LLC.")	or the purpose of transacting f	pusiness in Florida. The alter	rnate name must include	"Limited
Delaware	3			
Jurisdiction under the law of which foreign limits company is organized)	ed liability	(FEI number, if	applicable)	
	and desirance Placetonic			
	nsacted business in Florida, if .0904 & 605.0905, F.S. to de	termine penalty liability)		
3303 Water Street NW	Unit 8H			<u> </u>
Washington, DC 20007				
	(Street Address of Princip	al Office)		
3303 Water Street NW I	Jnit 8H			
Washington, DC 20007				
<u> </u>	(Mailing Address)	- W-4	
Attached is an original certificate of eving custody of records in the jurisdiceptable. If the certificate is in a foreign	ction under the law of	which it is organized.	(A photocopy is	not
ust be submitted)	B., 141.1641156, a		and out of the	11411514(01
K	u Can			
accordance with section 605.0203, F.S., the execution of		firmation under the penalties of		
aware that my false information submitted in a docume	•	stitutes a third degree felouy as		
Kim Came				**************************************
τ	vped or printed name o	f signee	Send O	Anna .
			OF S	IT:
			왕절 양	

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.

	of the Limited Liability Co /X PARTNERS	• •	
If unavailable	e, the alternate to be used in	the state of Florida is:	
2. The name	and the Florida street addre	ess of the registered agent and office are:	
	Kim Cameron	1	
		(Name)	-
	5875 Collins A	Ave.	
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)	-
	Miami Beach	FI 33140	
		City/State/Zip	_
liability comp registered ago statutes relati	oany at the place designated ent and agree to act in this c ing to the proper and comple	and to accept service of process for the above so this certificate, I hereby accept the appoint capacity. I further agree to comply with the prete performance of my duties, and I am familiate gistered agent as provided for in Chapter 60 comply agent as provided for in Chapter 60 complete for the complete for the chapter 60 complete for the complete for the chapter 60 complete for the chapter	ment as to roysson & fall_ invite and r-
	•	.00 Filing Fee for Application .00 Designation of Registered Agent .00 Certified Copy (optional)	
	•	.00 Certificate of Status (optional)	

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SIDE F/X PARTNERS LLC" IS DULY FORMED UNDER THE LANS OF THE STATE OF DELAMARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF APRIL, A.D. 2015.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SIDE F/X PARTNERS LLC" WAS FORMED ON THE NINETEENTH DAY OF AUGUST, A.D. 2008.

jeffrey W. Bullock, Secretary of State TION: 2323288

DATE: 04-27-15