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ALLAHASSEE, FLORID:

J. HARRIE

COVER LETTER

TO:

Registration Section

Divi	sion of Corporation	18				
SUBJECT:	MARK WILLIAM			·		
		Name of	Limited Liability	Company		
		eign Limited Liability Com d to register the above refer				
Please return	all correspondence of	concerning this matter to the	following:			
	Mark Williams					
	<u></u>	N	ame of Person			
	Mark Williams	Films, LLC				
		F	irm/Company			
	201 Crandon B	lvd. #144				
			Address			
	Key Biscayne F	FL 33149				
		City/S	tate and Zip Code		* * * * * * * * * * * * * * * * * * * *	
	mark@zerogravi	tymanagement.com				
		E-mail address: (to be use	d for future annual	report not	lification)	
For further inf	formation concerning	g this matter, please call:				
Marl	k Williams		310 at (656-94	40	
	Name o	f Contact Person	Area Code	Day	rtime Telephone Number	
Divis Regis P.O.	LING ADDRESS: sion of Corporations stration Section Box 6327 hassee, FL 32314	· ·		Division Registrat Clifton B 2661 Exe	of Corporations ion Section uilding ecutive Center Circle iee, FL 32301	
	check for the follow 25.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filir Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Ce of Status & Certified Cop	

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:

f name unavailable, enter a iability Company," "L.L.C,	Iternate name adopted for the purpo	se of tra	nsacting business	in Florida. The alternate n	name must include "Limite
California	,	3	26-1593480		
(Jurisdiction under the law company is organized)	of which foreign limited liability	5.		(FEI number, if applicab	ole)
·	(Date first transacted busing	ess in F	lorida, if prior to r	egistration.)	
1531 14th Street	(See sections 605,0904 & 60	5.0905,	F.S. to determine	penalty liability)	
Santa Monica CA 904	04				
	(Street Address of	Princip	al Office)		
1531 14th Street	``	·			## ज
Santa Monica CA 904	04				Jun 22
	(Mailing	Addres	s)		
Name and street address	ss of Florida registered agent: (I	P.O. Bo	x NOT acceptal	ole)	i i i i i i i i i i i i i i i i i i i
Name:	Mark Williams		***************************************	,	
Office Address:	201 Crandon Blvd # 144				- 32 - 32
	201 Crandon Blvd # 144 Key Biscayne			Florida 33149	TATE ORIDA
Office Address: egistered agent's accep	Key Biscayne (City)	vice of		(Zip code)	
Office Address: egistered agent's accep aving been named as re is application, I hereby ith the provisions of all	Key Biscayne (City) tance: rgistered agent and to accept sel accept the appointment as registatutes relative to the proper al	stered and com	process for the gent and agree plete performan	(Zip code) above stated corporations act in this capacity.	 on at the place designat I further agree to comp
Office Address: egistered agent's accep laving been named as re is application, I hereby ith the provisions of all e obligations of my posi	Key Biscayne (City) tance: rgistered agent and to accept sel accept the appointment as registatutes relative to the proper al ition as registered agent. (Regis	stered and com	Process for the igent and agree plete performan	(Zip code) above stated corporation act in this capacity. ce of my duties, and I defined the control of the co	 on at the place designat I further agree to comp
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Office Address: egistered agent's acceptaving been named as reis application, I hereby ith the provisions of all the obligations of my positive obligations.	Key Biscayne (City) stance: registered agent and to accept set accept the appointment as registatutes relative to the proper action as registered agent. (Registative and address of the person(set)	stered and com	Process for the igent and agree plete performan	(Zip code) above stated corporation act in this capacity. ce of my duties, and I defined the control of the co	 on at the place designat I further agree to comp

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

Typed or printed name of signee

degree felony as provided for in s.817.155, F.S.)

Mark Williams

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: MARK WILLIAMS FILMS, LLC

FILE NUMBER:

201106010235

FORMATION DATE:

02/14/2011

TYPE:

DOMESTIC LIMITED LIABILITY COMPANY

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of June 4, 2015.

ALEX PADILLA Secretary of State