# Florida Department of State

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(((H15000157542 3)))



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### Foreign Limited Liability Company Licensed Products, L.L.C.

Certificate of Status	0
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6/26/2015 10T-01-5016 14:38



June 29, 2015

FLORIDA DEPARTMENT OF STATE Division of Corporations

BUSINESS FILINGS

SUBJECT: LICENSET PRODUCT, L.L.C.

REF: W15000044175

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return 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.

Jenna D Harris Regulatory Specialist II FAX Aud. #: H15000157542 Letter Number: 515A00013541

15 JUL -1 AM 7: 52

P.O BOX 6327 - Tallahassee, Florida 32314

# H150001575433

## WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that I am	the Authorized Person	on E	≛; \$;;	<u>ح</u>	
Licensed Products, L.L.C.				<u>-</u>	
(Name of Limited Liability	Company)			÷	
a limited liability company duly organized and e	xisting under the law	s of		AH 7:5	
(State or Country of Organization)			<b>9</b> m	52	•
Because the name of this foreign limited liability requirements of the s. 605.0112, F.S., the limited		•	ots the		
following name to transact business in the state	of Florida:				
Licensed Products Mlami, L.L.C.					
(Name to be used by limited liability company in Florida. NOT Company, L.L.C., or LLC.)	E: Name must contain Limit	ed Liability	•	•	
Morris Shas	ho, Member	6/30/2	201	5	
Signature Authorized Person		Date			

CR2E122 (12/13)

1099 728 809

# Fax Audi+# HISOW 1575423

### 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

	<i>LIABILITY COMPANY TO TRANSACT BUSINESS IN THE</i> sed Products, L.L.C.	E STATE OF FLORIDA:	
	ante of Foreign Limited Liability Company; must include Products Miami, L.L.C.	le "Limited Liability Company," "L.L.C.	," or "LLC.")
consent o	mavailable, enter alternate name adopted for the purpos f the managers or managing members adopting the altern ""L.L.C." "LLC.")		
New J	ersey :	22-3546134	
(Jurisdi	ction under the law of which foreign limited liability any is organized)	(FEI number, if applicat	ole)
Upon 4.	Filing.		
	(Date first transacted business in Flo (See sections 605.0904 & 605.0905, F	rida, if prior to registration.) .S. to determine penalty liability)	
744 B	road Street, Newark, New Jersey 07102		#6 <b>5</b>
	•		また 一二
	(Street Address o	of Principal Office)	E I
6. <u>744 B</u>	road Street, Newark, New Jersey 07102		
			: <b>52</b>
	(Mailing	z Address)	7.1
	name, title or capacity and address of the person Morris Shasho, 744 Broad Street, Newark, New Jersey	• •	anage is/are:
in the juris	ed is an original certificate of existence, no more than 90 d diction under the law of which it is organized. (A photoc of the certificate under oath of the translator must be subm	opy is not acceptable. If the certificate is in	
	de		<del></del>
		authorized person	
	(In accordance with section 605.0203, F.S., the execution penalties of perfury that the facts stated herein are true document to the Department of State constitutes Morris Shasho	e. I am aware that any false information s	ubnxitted in a
	Typed or printed	name of signee	_

1099 728 809

## Eax Audit # H150001575423

### 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 o	of the Limited Liability Co	ompany is:	
Licensed Produc	ts, L.L.C.		
If unavailable.	the alternate to be used in	n the state of Florida is:	
Licensed Produc	ts Miami, L.L.C.		
2. The name a	nd the Florida street addi	ress of the registered agent and office are:	<b>5</b>
	Business Filings Incorporated		
	(Name)		一線上に
	1200 South Pine Island Road		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		7: 52
	Plantation	33324 FL	DA C
		City/State/Zip	<del></del>

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. Thereby 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.

Mark Williams, A.V.P., Business Filings Incorporated

S 100.00 Filing Fee for Application 5 25.00 Designation of Registered Agent S 30.00 Certified Copy (optional) 5.00 Certificate of Status (optional)

# STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

#### LICENSED PRODUCTS, L.L.C.

0600034457

With the Previous or Alternate Name

#### TELENET MOBILE (Alternate Name)

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on January 15, 1997.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and registered office are:

Mourad Shasho 744 Broad Street Newark, NJ 07102

THE STATE OF THE S

Certification# 136786670

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 26th day of June, 2015

6.

Andrew P Sidamon-Eristoff
State Treasurer

Verify this certificate at https://www1\_state.nj.us/TYTR\_StandingCert/JSP/Verify\_Cert.jsp