M15000005643

(Re	questor's Name)			
(Ad	dress)			
/Ad	dress)			
(//4	uress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(D.	-in-T-Ait. No.			
(Bu	siness Entity Nar	пе)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
,	:			

Office Use Only



200274832372

07/15/15--01003--004 **125.00

SUFFICIENCY OF FILEY

OFFICE AH 9: 59

FILEU STATE

When you need ACCESS to the world

ACCESS,

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

WALK IN					
		PICK UP:	7-15-15		
		CERTIFIED COPY			
		РНОТОСОРУ			
		cus			
	\Rightarrow	FILING	LLC		
1.	-	Mayous Media (CORPORATE NAME AND DOCUMENT #)	LLC		
2.	_	(CORPORATE NAME AND DOCUMENT #)			
3.	-	(CORPORATE NAME AND DOCUMENT #)			
4.	-	(CORPORATE NAME AND DOCUMENT #)			
5.	_	(CORPORATE NAME AND DOCUMENT #)			
5.					
		(CORPORATE NAME AND DOCUMENT #)			
SPE	CIAL	INSTRUCTIONS:			

COVER LETTER

TO:

Registration Section

Enclosed is a check for the following amount:

□ \$125.00 Filing Fee

Division of Corporations Magnus Media, 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: **Emily Wolf** Ungerlaw, PC Firm/Company 12121 Wilshire Blvd., Ste. 1201 Los Angeles, CA 90025 filings@eminutes.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **Emily Wolf** Name of Contact Person **MAILING ADDRESS:** STREET ADDRESS: Division of Corporations Division of Corporations Registration Section Registration Section Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassec, FL 32314

Tallahassee, FL 32301

□ \$155.00 Filing Fee &

Certified Copy

□ \$130.00 Filing Fee &

Certificate of Status

□ \$160.00 Filing Fee, Certificate

of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 16, 2015

CORPORATE ACCESS, INC.

SUBJECT: MAGNUS MEDIA, LLC Ref. Number: W15000047604

Collected

15 JUL 17 AM IO: 38

We have received your document for MAGNUS MEDIA, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 015A00014896

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:

Magnus Media, LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must in Liability Company," "L.L.C," or "LLC.")	
Delaware	295
2. (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)	· · · · · · · · · · · · · · · · · · ·
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	-100 E
5. 810 Seventh Avenue, Ste. 1701, New York, NY 10019	0000
(Street Address of Principal Office) 6. 810 Seventh Avenue, Ste. 1701, New York, NY 10019	
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to manage is.	/are:
Marco Muniz, Manager,810 Seventh Avenue, Ste. 1701, New York, NY	
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated be having custody of records in the jurisdiction under the law of which it is organized. (A photocop acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of must be submitted)	y is not
Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the fac 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.8	
Marco Muniz	

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 Co	ompany is:	
If unavailable, the alternate to be used in	the state of Florida is:	
2. The name and the Florida street address eResidentAg		THE JUL 17
236 E 6th A		M 8 38
Tallahassee	Address (P.O. Box NOT ACCEPTABLE) FL 32303 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.

(Signature)

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

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "MAGNUS MEDIA, 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 THIRTEENTH DAY OF JULY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MAGNUS MEDIA, LLC" WAS FORMED ON THE NINTH DAY OF MARCH, A.D. 2015.

5706255 8300

151041417

DATE: 07-13-15

AUTHENTA CATION: 2549884

You may verify this certificate online at corp.delaware.gov/authver.shtml