M15000009029

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			
		:		

Office Use Only



200278809452

2015 NOV -4 PM 1:57 2

A SECRETARY OF STATE

1. HARRIS

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

REFERENCE: 859197 43535

AUTHORIZATION Smell &

COST LIMIT : U\$\160.00

ORDER DATE: November 3, 2015

ORDER TIME : 9:38 AM

ORDER NO. : 859197-005

CUSTOMER NO: 4353585

FOREIGN FILINGS

NAME: DIAMOND DOLLS ENTERPRISES LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

COVER LETTER

TO: Registration Section

Divis	ion of Corporation					
SUBJECT:	Diamond Dolls Li	mited Liability Company				
50 505 01		Name of I	Limited Liability	Company		
The enclosed 'Existence, and	'Application by For check are submitte	eign Limited Liability Comp d to register the above refere	any for Authoriza nced forcign limi	ation to Tra ted liability	nsact Business in Florida," company to transact busin	Certificate of ess in Florida
Please return a	all correspondence of	concerning this matter to the	following:			
	Michael Mosko	witz				
	<u> </u>	Na	ame of Person			
Firm/Company						
	70 Grand Ave					
			Address			
	River Edge,,	New Jersey 07661				
	• **	City/St	ate and Zip Code			
	mmcpaesq@gma	il.com				
	, and ,	E-mail address: (to be used	for future annual	report not	ification)	
For further inf	ormation concerning	g this matter, please call:				
Mich	ael Moskowitz		201 at (342-150	00	
	Name o	f Contact Person	Area Code	Day	time Telephone Number	
Divis Regis P.O. 1	LING ADDRESS: ion of Corporations tration Section Box 6327 hassee, FL 32314			Division of Registrati Clifton Br 2661 Exc	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301	
	check for the follow 25.00 Filing Fee	ing amount: \$\Bigcup \\$130.00 \text{ Filing Fee & Certificate of Status}\$	□ \$155.00 Filia Certified Copy	_	■ \$160.00 Filing Fee, Co of Status & Certified Cop	



FLORIDA DEPARTMENT OF STATE RESUBMT Division of Corporations

November 9, 2015

Please give original submission date as file date.

CSC COURTNEY WILLAIMS

SUBJECT: DIAMOND DOLLS LIMITED LIABILITY COMPANY

Ref. Number: W15000073050

We have received your document for DIAMOND DOLLS LIMITED LIABILITY COMPANY and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

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

Letter Number: 115A00023633





FLORIDA DEPARTMENT OF STATE Division of Corporations

November 5, 2015

CSC COURTNEY WILLAIMS RESUBMIT

Please give original submission date as file date.

SUBJECT: DIAMOND DOLLS LIMITED LIABILITY COMPANY

Ref. Number: W15000073050

We have received your document for DIAMOND DOLLS LIMITED LIABILITY COMPANY and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is P00000064435.

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

2015 NOV -4 AM 9: 2

Regulatory Specialist II

Letter Number: 215A00023423

2015 NOV -4 AM 9: 2:

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

IN COMPLIANCE IVITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	ted Liability Company eign Limited Liability Company; must	include "Limited Lie	bility Company " "] C " or "			
Optimum Media LLC	eigh Emilied Liaomiy Company, must i	inculue Laimed Lit	ionny company, D.D.C., or I	<i>.</i> ,		
	Iternate name adopted for the purpose of "LLC.")	of transacting busine	ss in Florida. The alternate name	must includ	e "Limi!	ied
2. New Jersey	•	3 46-2691464				
	of which foreign limited liability	<i>J</i>	(FEI number, if applicable)			
4. November 1 2015						
	(Date first transacted business (See sections 605.0904 & 605.09	in Florida, if prior to	o registration.) e penalty liability)			
5. 5280 North East 19th						
Fort Lauderdale, Fl 3	3308					
	(Street Address of Prin	ncipal Office)				
6. 5280 North East 19th A	ve			Ξ_S	2015	
Fort Lauderdale, Fl 333	308					Errat Jung.
	(Mailing Ad	dress)		<u>二世</u> 四	NON.	
7. Name and street addres	s of Florida registered agent: (P.O.	. Box NOT accept	able)	SS	+	
Name:	Devon Carbone	'	•	اے دیا]>> -!!	
	5280 North East 19th Ave		-	500	بي	generalization .
Office Address:	Fort Lauderdale		- - 33308	OKION	28	
	(City)		, Florida (Zip code)			
designated in this applicate to complywith the provision	istered agent and to accept service tion, I hereby accept the appointments on all statutes relative to the prony position as registered agent. By:	ent as registered a	gent and agree to act in this c	capacity. I	furthe	r agree
		ed agent's signature)				
•	city and address of the person(s) wig Member 5280 North East 19th A		· -			
jurisdiction under the law o of the translator must be su	Signature of	an authorized person	n language, a translation of th	e certificat	e under	the oath
and document is executed submitted in a document to	in accordance with section 605.020 the Department of State constitutes Devon Carbone	is (1) (0), Florida S s a third degree feld	praidings, I am aware that any ta ony as provided for in s.817.15	ise informa 5, F.S.	mon	

Typed or printed name of signee

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

DIAMOND DOLLS LIMITED LIABILITY COMPANY

0400570819

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 May 3, 2013.

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:

Michael Moskowitz 70 Grand Ave 70 Grand Ave River Edge, NJ 07661

CREAT SET AND SET OF SE

Certification# 137568176

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 4th day of November, 2015

It a Contain

Robert A Romano Acting State Treasurer

Verify this certificate at https://www1.state.nj.us/TYTR_StandingCert/JSP/Verify_Cert.jsp