

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.

(((H16000003746 3)))



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

: INCORP SERVICES INC

Account Number : 120120000007

Phone

: (702)866-2500

Fax Number

: (702)866-2689

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

Foreign Limited Liability Company MediaCurrent Interactive Solutions, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help



Enclosed is a check for the following amount:

\$\Pi\$ \$125.00 Filing Fee \$\Pi\$ \$130.00

□ \$130.00 Filing Fee &

Certificate of Status

COVER LETTER

H16000003746 3

TO; Registration Section **Division of Corporations** MediaGurrent Interactive Solutions, LLC SUBJECT: 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: Janice Null Name of Person InCorp Services, Inc. Firm/Company 2360 Corporate Circle, uite 400 Address Henderson, NV 89074 City/State and Zip Code documents@incorp.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Janice Null on behalf of InCorp Services, Inc. 800 246-2677 Name of Contact Person Arca Code Daytime Telephone Number **MAILING ADDRESS:** STREET ADDRESS: Division of Corporations **Division of Corporations** Registration Section Registration Section P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

H16000003746 3

☐ \$160.00 Filing Fee, Certificate

of Status & Certified Copy

Tallahassee, FL 32301

■ \$155.00 Filing Fee &

Certified Copy

H16000037463

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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1 MediaCurrent Interact					
(Name of Fore	ign Limited Liability Company; mus	t include "Limited Liab	ility Company," "L.L.	C.," or "LLC.")	
· · · · · · · · · · · · · · · · · · ·					
(If name unavailable, enter all Liability Company," "L.L.C,"	ternate name adopted for the purpose or "LLC.")	of transacting business	in Florida. The altern	ate name must include "L	imited
2. Georgia		, 20	6-0442587		
(Jurisdiction under the law company is organized)	of which foreign limited liability		(FEI number, if app	licable)	
4. Upon Registration	•			<u></u>	
	(Date first transacted busines (See sections 605.0904 & 605.0	is in Florida, if prior to o	registration.) penalty liability)		
5. 3180 N. Point Pkwy.,					
Alpharetta, GA 30005	;				
	(Street Address of P	rincipal Office)			
6. 3180 N. Point Pkwy.,	Sie. 208			- CO - S	-11
Alpharetta, GA 30005	i				
	(Mailing A	ddress)		- 100 P	TTT :
7. Name and street addres	s of Florida registered agent: (P.	O. Box <u>NOT</u> accepta	ble)		Ö
Name:	InCorp Services, Inc.			53 5	- -
Office Address:	17888 67th Court North			7	
	Loxahatchee		, Florida 33470	**	
	(City)		(Zip co	ide)	
Registered agent's accep-	tance:		_E	d Bakilin agungun at	the place
Having been named as re- designated in this applica	gistered agent and to accept serv tion, I hereby accept the appoint	ice of process for the ment as registered ag	ent and agree to ac	t in this capacity. I fu	rther agree
to complywith the provision	ons of all statutes relative to the p	roper and complete	performance of nty	duties, and I am famil	liar with e nd
accept the obligations of i	ny position as registered agent.	_			-
	Janua Y	Jule	Janice Null on b	ehalf of InCorp Service	es, inc.
•	(Registe	red agent's signature)			
8. The name, title or capa	city and address of the person(s)	who has/have authori	ty to manage is/are:		
Paul Chason, Manager	3180 N. Point Pkwy., Ste. 208,	Alpharetta, GA 3000)5		
Dave Terry, Manager	3180 N. Point Pkwy., Stc. 208,	Alpharetta, GA 3000	5		
•	· · · · · · · · · · · · · · · · · · ·				
				<u> </u>	
9. Attached is a certificate	of existence, no more than 90 day	s old, duly authentica	ated by the official h	naving custody of recon	ds in the
	of which it is organized. (If the ce	rtificate is in a foreig	n language, a transla	ation of the certificate u	nder oath
of the translator must be su	ubmitted)	CD			
•	1 and	(laton			
	V Signature	of an authorized person			
This document is executed submitted in a document to	l in accordance with section 605.0 the Department of State constitut	203 (1) (b), Florida S tes a third degree felo	tatutes. I am aware t ny as provided for it	that any false information s.817.155, F.S.	n
HOVELINE	-	Chason		•	
	Timed or n	rinted name of ciones			

Control Number: 07053748

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

MEDIACURRENT INTERACTIVE SOLUTIONS, LLC

a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

> Docket Number Date Inc/Auth/Filed Iurisdiction Print Date

:06/28/2007 : Georgia : 1/6/2016 Form Number : 211

: 12380468



Brian P. Kemp Secretary of State

H16000003746 3