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(Requestor's Name)

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(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

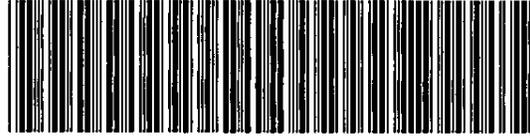
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TALLAHASSEE, FLORIDA

FEB 10 2016
S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
2016 FEB -8 AM 11:22
TALLAHASSEE, FLORIDA

January 21, 2016

VICTORIA GIBSON
607 NORTH AVENUE STE E
WAKEFIELD, MA 01880 US

SUBJECT: BEACONLIVE, LLC
Ref. Number: W16000004315

We have received your document for BEACONLIVE, 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.

Shelia H Young
Regulatory Specialist II

Letter Number: 016A00001409

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BeaconLive, 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:

Victoria Gibson

Name of Person

BeaconLive, LLC

Firm/Company

607 North Ave., Suite E

Address

Wakefield, MA 01880

City/State and Zip Code

vgibson@bcaconlive.com; jbono@beaconlive.com

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Victoria Gibson

781

587-2740

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

\$125.00 Filing Fee

\$130.00 Filing Fee &
Certificate of Status

\$155.00 Filing Fee &
Certified Copy

\$160.00 Filing Fee, Certificate
of Status & Certified Copy

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:

1. BeaconLive, 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 include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Massachusetts 3. 81-0943906
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 1/4/16
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 607 North Ave. Suite E
Wakefield, MA 01880
(Street Address of Principal Office)

6. _____
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Anthony Rotella
Office Address: 744 Harbor Drive S
Venice, FL, Florida 34285
(City) (Zip code)

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Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

[Signature]
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
John Duplin - P, CEO
607 North Ave. Suite E
Wakefield, Ma 01880

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

[Signature]
Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I 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.817.155, F.S.

John Duplin, President & CEO
Typed or printed name of signee



The Commonwealth of Massachusetts
Secretary of the Commonwealth
State House, Boston, Massachusetts 02133

William Francis Galvin
Secretary of the
Commonwealth

January 27, 2016

TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of Limited Liability Company was filed in this office by

BEACONLIVE, LLC

in accordance with the provisions of Massachusetts General Laws Chapter 156C on **December 30, 2015.**

I further certify that said Limited Liability Company has not filed a certificate of cancellation; that said Limited Liability Company has not been administratively dissolved; and that, so far as appears of record, said Limited Liability Company has legal existence.

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TALLAMOUNTAIN LONDON

In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

William Francis Galvin

Secretary of the Commonwealth



D

The Commonwealth of Massachusetts

William Francis Galvin
Secretary of the Commonwealth
One Ashburton Place, Room 1717, Boston, Massachusetts 02108-1512

**Limited Liability Company
Certificate of Organization
(General Laws Chapter 156C, Section 12)**

Federal Identification No.: 81-0943906

(1) The exact name of the limited liability company:

BeaconLive, LLC

(2) The street address of the office in the commonwealth at which its records will be maintained:

607 North Avenue, Suite E
Wakefield, MA 01880

(3) The general character of the business:

To provide services and products for event conferencing, webcasting, webinars and similar electronic communications, and any other business or activity permitted by applicable law.

(4) Latest date of dissolution, if specified: _____

(5) The name and street address, of the resident agent in the commonwealth:

NAME	ADDRESS
John E. Duplin	607 North Avenue, Suite E Wakefield, MA 01880

(6) The name and business address, if different from office location, of each manager, if any:

NAME	ADDRESS
John E. Duplin	607 North Avenue, Suite E Wakefield, MA 01880
Anthony E. Rotella	607 North Avenue, Suite E Wakefield, MA 01880
Alan Levy	607 North Avenue, Suite E Wakefield, MA 01880
Richard Shorten, Jr.	607 North Avenue, Suite E Wakefield, MA 01880
Charles White	607 North Avenue, Suite E Wakefield, MA 01880

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(7) The name and business address, if different from office location, of each person in addition to manager(s) authorized to execute documents filed with the Corporations Division, and at least one person shall be named if there are no managers:

NAME	ADDRESS
Steven D. Eimert	c/o Sherin and Lodgen LLP 101 Federal Street Boston, MA 02110
Eleanor M. Uddo	c/o Feigenbaum & Uddo, LLC 386 Washington Street Wellesley, MA 02481

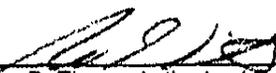
(8) The name and business address, if different from office location, of each person authorized to execute, acknowledge, deliver and record any recordable instrument purporting to affect an interest in real property recorded with a registry of deeds or district office of the land court:

NAME	ADDRESS
John E. Duplin	607 North Avenue, Suite E Wakefield, MA 01880
Anthony E. Rotella	607 North Avenue, Suite E Wakefield, MA 01880

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 TALENT CENTER, LONDON

(9) Additional matters:

See Attachment A.

Signed by (by at least one authorized signatory): 
 Steven D. Eimert, Authorized Person

Consent of resident agent:

John E. Duplin
 resident agent of the above limited liability company, consent to my appointment as resident agent pursuant to G.L. c 156C § 12*

*or attach resident agent's consent hereto.

BeaconLive, LLC

Attachment A

(9) Additional Matters:

A. No Member or Manager of the Company shall, as such, be liable for any obligations of the Company.

B. No Member may, in such capacity, act for, contract on behalf of or in any other way bind the Company.

C. The Operating Agreement of the Company may provide for one or more classes of Members, with such relative rights, powers, preferences and limitations as the Operating Agreement may from time to time provide.

D. The Operating Agreement of the Company may provide for one or more officers and/or agents of the Company, with such powers, authority and limitations as the Operating Agreement or the Managers may from time to time provide.

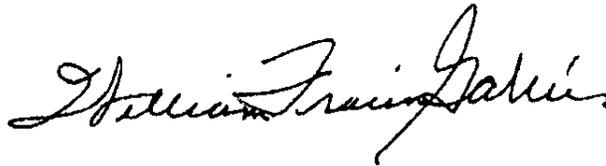
E. To the fullest extent that the Massachusetts Limited Liability Company Act (or any successor provision), as the same exists or may hereafter be amended, permits elimination or limitation of the liability of Members and/or Managers of the Company, no such person or entity shall be liable to the Company or its Members for monetary damages on account of any breach of the duties of such Manager or Member.

SECRETARY OF STATE
TALLMANSFIELD, MASSACHUSETTS 01946
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THE COMMONWEALTH OF MASSACHUSETTS

I hereby certify that, upon examination of this document, duly submitted to me, it appears that the provisions of the General Laws relative to corporations have been complied with, and I hereby approve said articles; and the filing fee having been paid, said articles are deemed to have been filed with me on:

December 30, 2015 10:24 AM



WILLIAM FRANCIS GALVIN

Secretary of the Commonwealth

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TALLEMANSSEE, FLORIDA