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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 smail address please. **

Foreign Limited Liability Company Proscenium Events, LLC

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COVER LETTER

	ion Section of Corporation	ili	,			
SUBJECT: Pros	cenium Eve	ints, LLC				
SUBJECT:		Name of L	imited Liability (Company	·	
					neact Business in Florida," Certificate of company to transact business in Plorida	
Please return all co	rrespondence (concerning this matter to the f	bllowing:			
		Jay	oie Howard			
-		Na	me of Person			
		ìnCorp	Services, Inc.	•	·	
-	Firm/Company					
		3773 Howard Hu	ighes Pkwy • I	Sulte 500	ls .	
-	· · · · · · · · · · · · · · · · · · ·		Address			
		Las Vegas	s, NV 89169-6	014		
•	•	City/St	nte and Zip Code			
		-	porte@incorp.			
•		B-mail address: (to be used	for future annual	report not	ification)	
For further informe	tion concernin	ig this matter, please call:				
Jayole Ho	oward on Bel	nalf of InCorp Services, Inc.	702	B86-2	<u>-</u>	
		of Conlact Parson	Area Code	Day	time Telephone Number	
Division o	G ADDRESS: of Corporations on Section			Division	ADDRESS: of Corporations ion Section	
P.O. Box				Clifton B 2661 Exc		
Enclosed is a check ☐ \$125.0	k for the follow O Filing Fee	ring amount: \$\infty\$ 130.00 Filing Fee & Certificate of Status	# \$155,00 Fills Certified Copy	ng Pec &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy	

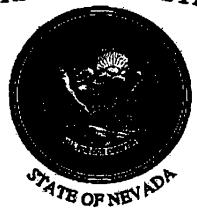
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SEC COMPANY TO TRANSACT BU	TION 605.0902, FLORIDA STATUTES, THE FOLLOWIN ISINESS INTHE STATE OF FLORIDA:	G IS SUMMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
1. Proscenium Events (Name of Fore	, LLC ign Limited Liability Company; must include "Limited	Liability Company," "L.L.C.," or "LL.C.")
(If name unavailable, enter at Liability Company," "LLC,"	lemate name adopted for the purpose of transacting but	siness in Florida. The alternate name must include "Limited
, Nevada	, 9	0-0705824
(Jurisdiction under the law company is organized)	of which foreign limited liability	(PEI number, if applicable)
4, Upon Registration	•	
	(Date first transacted business in Florida, if pr (See sections 605,0904 & 605,0905, F.S. to deta	or to registration.) mino penalty liability)
5. 247 W 38th St, 4th	<u>Fl</u>	
New York, NY 100	(Street Address of Principal Office)	lar to registmilan.) rmino penalty liability)
6. 247 W 36th St, 4th	• • •	
New York, NY 1001		
	(Mailing Address)	
7. Name and street address	s of Plorida registered agent: (P.O. Box <u>NOT</u> ac	captable)
Name:	InCorp Services, Inc.	
Office Address:	17888 67th Court North	
	Loxahatchee	, Florida <u>93470</u> (Zip code)
Registered agent's accept	(City)	(Zip code)
Having been named as reg designated in this applicat to complywith the provision	ristered agent and to accept service of process fi ion, I hereby accept the appointment as register ws of all statutes relative to the proper and comp ny position as registered agent.	or the above stated limited liability company at the place ed agent and agree to act in this capacity. I further agree plets performance of my duties, and I am familiar with and Jaycie Howard on behalf of InCorp Services, inc.
	(Rogistared agent's signal	ure)
8. The name, title or capa	u v city and address of the person(s) who has/have au	•
	r, 247 W 36th St, 4th Fl, New York, NY 1	
	ger, 247 W 36th St, 4th Fl, New York, NY	
Jurisdiction under the law o		enticated by the official having custody of records in the preign language, a translation of the certificate under onth
of the translater must be su	Detillar	
of the translator must be su		erson .
This document is executed	Signature of an authorized p	ida Statutes. I am aware that any false information

Typed or printed name of signed

SECRETARY OF STATE





CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, PROSCENIUM EVENTS, LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since April 19, 2011, and is in good standing in this state.

Barbara K. Cegarste

office on September 26, 2016.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20180926-1922
You may verify this electronic certificate
online at http://www.nvsos.gov/

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