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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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

Email Address:

Foreign Limited Liability Company
Impact Performing Arts Consulting, LLC

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TO

Registration Section Division of Corporations

COVER LETTER

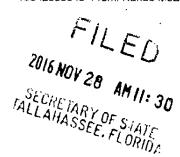
SUBJECT:	Impact Performing	Arts Consulting, LLC						
DUPULOTT.		Name of	Limited Liability C	Company	<u> </u>	<i>F</i> •		
The enclosed Existence, and	"Application by Fore	eign Limited Liability Comp to register the above refere	any for Authoriza accd foreign limit	tion to Tre ed liability	msact Business in Florids, y company to transact busi	" Certificate of ness in Florida		
Please return all correspondence concerning this matter to the following:								
	Eilsen K, Tobin	, Corporate Paralegal						
Name of Person								
	Cameron & Mit	tleman LLP						
Firm/Company								
	301 Promonade Street							
Address								
	Providence, RI 02908							
City/State and Zip Code								
ETobin@em-law.com								
B-mail address: (to be used for future annual report notification)								
For further inf	ormation concerning	this matter, please call:						
Eilee	n K. Tobin, Corpora	ite Paralogal	40))	700 x336			
	. Name of	Contact Person	Area Code	Day	time Telephone Number	•		
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Taltahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301						
Brolosed is a check for the following amount: ☐ \$125.00 Filing Fee \$\ \times \$130.00 Filing Fee & Certificate of Status		□ \$155,00 Filing Fee & Certified Copy		S160.00 Filing Fee, Certificate of Status & Certified Copy				

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

IN COMPLANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTIFISINGS IN THE STATE OF ITAXIDA Impact Performing Arts Consulting, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LEC.") (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.") Rhode Island 81-4491313 (Jurisdiction under the law of which foreign limited liability (FBI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 220 Weybosset Street, Providence, RI 02903 (Street Address of Principal Office) 220 Weybosset Street, Providence, RI 02903 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT soceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: Plantation Florida 33324 (City) (Zip code) 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 upplication, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith 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 fegistered agent. (Registered agent's signature) Lisa Shdeed, VP 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Norbert Mongeon, Jr., Vice President, 220 Weybosset Street, Providence, RI 02903 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) 1/23/16 Signature of an authorized person This document is executed in accordance with section 605,0203 (1) (b), Florida Statutes. I art 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. Norbert Mongeon, Jr., Vice President

Typed or printed name of signer





Certification Number: 16110041590

The office of the Secretary of State of the State of Rhode Island and Providence Plantations, HEREBY CERTIFIES, that

IMPACT PERFORMING ARTS CONSULTING, LLC

a Rhode Island limited liability company, filed original articles of organization in this office on

November 08, 2016

Effective

November 08, 2016

IT IS FURTHER CERTIFIED that as of this date said limited liability company is duly organized and existing under and by virtue of the laws of the State of Rhode Island and is in good standing according to the records of this office.

SIGNED AND SEALED ON

Thursday, November 10, 2016

Tulli U. Bolen

Secretary of State

Authorized Agent

