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D. SCOTT NOV 3 0 2016 **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Itakks Media, 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:
Pavion R. O'Cannon Name of Person
Itakks Media, LLC Firm/Company
605 Delanes Are 2nd Fl
City/State and Zip Code
E-mall address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Pavien L. O ConnoR at (917) 405 1618 Name of Contact Person Area Code Daytime Telephone Number 5
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\B\$\frac{125.00}{2}\$\$ Filing Fee \$\B\$\frac{130.00}{2}\$\$ Filing Fee & Certificate of Status \$\B\$\frac{155.00}{2}\$\$ Filing Fee \$\B\$\frac{160.00}{2}\$\$ Filing Fee \$\B

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: Trakk's Media LLC
(Name of Foreign 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.") New York (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability) Sand (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: 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 af further agree to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and Tam familiar with and accept the obligations of my position as registered agent. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: 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 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. R. O'ConnoR

Typed or printed name of signee

State of New York Department of State } ss

I hereby certify, that ITAKKS MEDIA, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 06/29/2015, and that the Limited Liability Company is existing so far as shown by the records of the Department.



Witness my hand and the official seal of the Department of State at the City of Albany, this 16th day of November two thousand and sixteen.

Brendan W. Fitzgerald

Executive Deputy Secretary of State

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