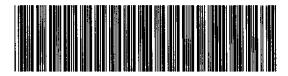
M17000003426

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	of Status				
Special Instructions to Filing Officer:						

Office Use Only



600298223966

04/20/17--01015--019 **125.00

D. SCOTT APR 21 2017



North Palm Beach: 660 U.S Highway One, 3rd Floor. N. Palm Beach, FL 33408 Palm Beach: 249 Royal Palm Way, Suite 301A. Palm Beach, FL 33480 \$\&\circ\$561.627.8100 \$\mathbb{L}\$561.622.7603 \$\mathbb{L}\$ haileshaw.com

April 19, 2017

FEDERAL EXPRESS NO. 778938494889

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

Re: Foreign Qualification Application for Luxury Life Media Group, LLC

To Whom it May Concern:

Enclosed are the following items:

- Corporate Cover Letter;
- Application by Foreign Limited Liability Company for Authorization to Transact Business;
- Delaware Certificate of Good Standing (Certificate of Existence) and
- Our firm's check in the amount of \$125.00

Please return the courtesy letter of acknowledgment in the self-addressed stamped envelope provided.

Sincerely,

HAILE, SHAW & PFAFFENBERGER, P.A.

By: Susie Sewersa, Assistant to PHILIP M. DICOMO, ESQ.

/sd enclosures T APR 20 PM 1: 5;

COVER LETTER

TO:

Registration Section

Divi	sion of Corporatio	ns					
SUBJECT:	LUXURY LIFE M	EDIA GROUP, LLC					
		Name of	Limited Liability C	Company			
The enclosed Existence, an	"Application by Fo d check are submitte	reign Limited Liability Com ed to register the above refer	pany for Authoriza enced foreign limit	tion to Transed liability of	sact Business in Floric company to transact b	la," Certificate of usiness in Florida.	
Please return	all correspondence	concerning this matter to the	following:				
	PHILIP M. DI	COMO, ESQ.					
		N	ame of Person				
	HAILE, SHAW & PFAFFENBERGER, P.A.						
		F	irm/Company	_		_	
	660 US HIGHWAY ONE, THIRD FLOOR						
	Address						
	NORTH PAL	M BEACH, FL 33408					
		City/S	tate and Zip Code	· <u>-</u>			
	MADISON@A	FFLUENTMEDIAGROUP.	СОМ				
		E-mail address: (to be use	d for future annual	report notifi	ication)	 :	
For further in	formation concerning	ng this matter, please call:				CFOR A	
PHI	LIP M. DICOMO/		561 at (627-8100		FILE AR 20 RETARK	
	Name	of Contact Person	Area Code	Daytii	me Telephone Numbe	r	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division of Registration Clifton Bui 2661 Execu		PA 1: 53		
	check for the follow 125.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	_	□ \$160.00 Filing Fee of Status & Certified		

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 RESIDENCE IN THE STATE OF FLORIDA.

1. LUXURY LIFE MED (Name of For	IA GROUP, LLC eign Limited Liability Company; must	inclu	de "Limited Lia	bility Company," "L.L.C.," or	"LLC.")
(If name unavailable, enter a Liability Company," "L.L.C	alternate name adopted for the purpose (," or "LLC."))I tra	nsacting busines	is in Florida. The atternate ha	me must include "Limited
2. DELAWARE		3.	82-1094169		
	of which foreign limited liability			(FEI number, if applicable	:)
4 FEBRUARY 10, 201	7				
	(Date first transacted business (See sections 605.0904 & 605.0	in F 905.	lorida, if prior to	registration.)	_
5. 7101 EAGLE TERRA	`				_
WEST PALM BEAC	H, FL 33412				
	(Street Address of Pr	incip	al Office)		- چشنو در است
6. 7101 EAGLE TERRA	CE				- 250
WEST PALM BEAC	H, FL 33412				题第四
	(Mailing A	dres	s)		20 元
7. Name and street addre	ess of Florida registered agent: (P.C). Bo	x <u>NOT</u> accept	able)	
Name:	HAILE, SHAW & PFAFFENBI	RG	ER, P.A.		
Office Address:	660 US HIGHWAY ONE, THIR	D F	LOOR	_	087 F 53
Office Audiess.	NORTH PALM BEACH			, Florida <u>33408</u>	
Registered agent's acce	(City)		·····	(Zip code)	_
designated in this application complywith the provis	egistered agent and to accept servi ation, I hereby accept the appointn itions of all statutes relative to the p my position as registered agent. (Register	nent rope	as registered a	gent and agree to act in the performance of my dutie	his capacity. I further agre
9. The serve title or cor	pacity and address of the person(s)	vho	nae/have autho	ritu to manage islare:	
,	, LLC, MEMBER, 7101 EAGLE T			•	
	ARTNERS, LLC, MEMBER, 445			<u> </u>	Y 10022
					
	or of existence, no more than 90 day of which it is organized. (If the cell submitted)	tific	ate is in a forei	gn language, a translation	
This document is execute submitted in a document	ed in accordance with section 605.02 to the Department of State constitut	203 (es a	1) (b), Florida hird degree fel	Statutes. I am aware that as ony as provided for in s.81	ny false information 7.155, F.S.

JENNIFER M. FREEMAN, MANAGER, POLO MEDIA GROUP, LLC

Page 1

<u>Delaware</u>

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "LUXURY LIFE MEDIA GROUP, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE SEVENTEENTH DAY OF APRIL, A.D. 2017.

FILED IN 1:53

Authentication: 202387671

Date: 04-17-17

6262166 8300 SR# 20172539960