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APR 2 5 2017 S. YOUNG SECRETARY OF STATE TALLAHASSEE, FLOND,

### COVER LETTER

Division of Cor				
SUBJECT:		edia 22c		
	Name o	of Limited Liability Company		
	n by Foreign Limited Liability Consulted to register the above ref			
Please return all correspo	ndence concerning this matter to the	ne following:		
	Robert.	A. Selt		
	_	Name of Person		
***************************************	Dane M	Firm/Company		
	10 NE 2nd	ST 394	<u> </u>	
	•	Address		
$\mathcal{B}$	oca Paton	F1 33	429	=
	City	/State and Zip Code		1 P.
	Restock	Jane Media	CAM	APR 21
	E-mail address: (to be us	sed for future annual report no	tification)	70 S
Eas forth as in formation as				
rot turner information co	oncerning this matter, please call:			
4050	Name of Contact Person		0-9569 ytime Telephone Number	E.FLORIDA
	rvaile of contact I cison	Alea code Da	yume receptione rumtoer	GD T
MAILING ADI			T ADDRESS:	
			Division of Corporations Registration Section	
P.O. Box 6327 Clifton Building				
Tallahassee, FL	32314		ecutive Center Circle see, FL 32301	
Enclosed is a check for th	e following amount:			
<b>7 5</b> 125.00 Filin		☐ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Cert of Status & Certified Copy	

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

• 1
IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY
COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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. Now Jersel 3. 20-8973218  (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. APCIL IST ZOIS
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905. F.S. to determine smallty liability.)
· Makerati Contract
170 NE 2nd St 39
(Street Address of Principal Office), Boca Raton FI
6. 170 NE ZNE ST 394 33429
7 has 61 77/179
Boca Raton F1 33429  (Mailing Address)
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
7/
Office Address: 101 Plaza Real S. 924
Boca Rater , Florida 33432 9 05 (City) (Zip code)
(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 application, 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 registered agent.
(Registered agent's signature)
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
Robert Sect - OWNER/ LEO
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)
of the transfer of Stoffmeter)
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.
Postert So III
Typed or printed name of signee

# STATE OF NEW JERSEY DEPARTMENT OF THE TREASURY DIVISION OF REVENUE AND ENTERPRISE SERVICES SHORT FORM STANDING

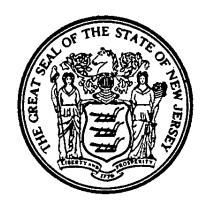
#### DANE MEDIA, LLC 0400178621

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on May 02, 2007.

As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.

I further certify that the registered agent and office are:

ROBERT SELT 385 SYLVAN AVENUE ENGLEWOOD CLIFFS, NJ 07632-2715



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal at Trenton, this 19th day of April, 2017

Ford M. Scudder Acting State Treasurer

Certificate Number: 6079155564

Verify this certificate online at

 $https://www1.state.nj.us/TYTR\_StandingCert/JSP/Verify\_Cert.jsp$ 

SECRETARY OF STATE PLORIDA