M17000004420

(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:						

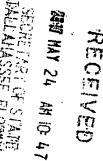
Office Use Only



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SECRETARY OF STATE
SECRETARY SEE FLORIDA

WAY 25 MIT ARRIS



CORPORATION SERVICE COMPANY 1201 Hays Street

CERTIFIED COPY
PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195							
REFERENCE : 651,980 8010003							
AUTHORIZATION : Spelle man							
COST LIMIT : \$ 130.00							
ORDER DATE : May 19, 2017							
ORDER TIME : 10:07 AM							
ORDER NO. : 651980-005							
CUSTOMER NO: 8010003							
FOREIGN FILINGS							
NAME: TWO FRANKS HOLDINGS, LLC							
XXXX QUALIFICATION (TYPE: <u>LL</u>)							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							

EXAMINER:

COVER LETTER

TO:

TO:	Registration Section Division of Corporation	ns							
SUBJI	Two Franks Holdin								
5000			Limited Liability (Company					
The en Exister	closed "Application by For	reign Limited Liability Comed to register the above refer	pany for Authoriza enced foreign limi	tion to Tra ted liabilit	ansact Business in Florida," y company to transact busine	Certificate of ess in Florida			
Please	return all correspondence	concerning this matter to the	following:						
	Brendan Water	house							
	 	N	lame of Person						
	NFGTV Inc. d.	NFGTV Inc. d/b/a Eastern							
	Firm/Company								
	220 12th Aven	220 12th Avenue, 3rd Floor							
	Address								
	New York, NY	New York, NY 10001							
		City/S	State and Zip Code						
	bwaterhouse@ea	astern.tv							
		E-mail address: (to be use	d for future annual	report no	tification)				
For fur	ther information concerning	g this matter, please call:							
	Brendan Waterhouse		646	628-52	40				
	Name o	of Contact Person	Area Code	Day	vtime Telephone Number				
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrat Clifton B 2661 Exe	F ADDRESS: of Corporations ion Section suiding secutive Center Circle see, FL 32301				
Enclos	ed is a check for the follow \$125.00 Filing Fee	ring amount: \$\infty\$ \$\infty\$ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filir Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Ce of Status & Certified Cop				

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:

1. Two Franks Holdings,			
(Name of Fore	eign Limited Liability Company; must include	e "Limited Liability Company," "L.L	.C.," or "LLC,")
(If name unavailable, enter al Liability Company," "L.L.C."	ternate name adopted for the purpose of trans	sacting business in Florida. The altern	nate name must include "Limited
2. New York	3.	45-3961147	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if app	ilicable)
4. May 15, 2017			
	(Date first transacted business in Flo (See sections 605.0904 & 605.0905, F.	rida, if prior to registration.) S. to determine penalty liability)	TA 25
5. 220 12th Avenue, 3rd			
New York, NY 10001			127 2
	(Street Address of Principal	Office)	
6. 220 12th Avenue, 3rd F	loor		mg =
New York, NY 10001			103 6.
	(Mailing Address)		- 6 7
7. Name and street addres	s of Florida registered agent: (P.O. Box	NOT acceptable)	T.
	Corporation Service Company	, , , , , , , , , , , , , , , , , , ,	
Name:			
Office Address:	1201 Hays Street		
	Tallahassee	, Florida 32301 (Zip c	
designated in this applicate to complywith the provision	(City) tance: gistered agent and to accept service of p tion, I hereby accept the appointment as ons of all statutes relative to the proper my position as registered agent. Corporation Service Company By:	process for the above stated limit is registered agent and agree to a	ed liability company at the place ct in this capacity. I further agree
	(Registered age	at s signature)	
8. The name, title or capa	acity and address of the person(s) who ha	s/have authority to manage is/are	:
Toby Barraud, 220 12th A	venue, 3rd Floor, New York, NY 10001	/ CEO	. <u></u>
Stefan Springman, 220 12	th Avenue, 3rd Floor, New York, NY 10	0001 / President	
Mala Chapple, 220 12th A	Avenue, 3rd Floor, New York, NY 10001	/COO	
jurisdiction under the law of the translator must be su	Signature of an au	e is in a foreign language, a transl thorized person	ation of the certificate under oath
	in accordance with section 605.0203 (1) the Department of State constitutes a thi	rd degree felony as provided for i	
	Stofan Spring	mana of signee	

State of New York Department of State } s

I hereby certify, that TWO FRANKS HOLDINGS, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 12/01/2011, 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 23rd day of May two thousand and seventeen.

Brendan W. Fitzgerald Executive Deputy Secretary of State

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