

M170000008604

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

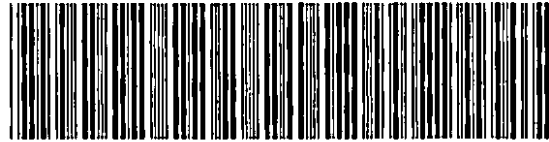
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800303306438

09/13/17--01035--021 **130.00

FILED
2017 OCT -6 3 19
FBI - NEW YORK

D. SCOTT
OCT 9 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 28, 2017

FRANK CARBONE
101 S EOLA DR APT 703
ORLANDO, FL 32801

SUBJECT: FCA MEDIA SOLUTIONS LLC
Ref. Number: W17000073887

We have received your document for FCA MEDIA SOLUTIONS LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Pijaux
Regulatory Specialist

Letter Number: 217A00019696

2017 OCT -6 PM 2:01

STATE OF FLORIDA

RECEIVED

2017 OCT -6 PM 3:19

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FCA Media Solutions
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:

Frank Corbone
Name of Person

FCA Media Solutions
Firm/Company

101 South Circle Dr. Apt 703
Address

Orlando FL 32801
City/State and Zip Code

FrankCorbone70@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Frank Corbone at (407) 353-1214
Name of Contact Person Area Code Daytime Telephone Number

MAILING ADDRESS:
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

2017 OCT -6
9-100112
618-6-3-19

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. FLA Media Solutions LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC")
2. Wyoming
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 81-241274
(FEI number, if applicable)
4. 10/1/17
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 101 South Eola DR Apt 703
(Street Address of Principal Office)
Orlando FL 32801
6. 101 South Eola DR Apt 703
(Mailing Address)
Orlando FL 32801

7. Name and street address of Florida registered agent: (P.O. Box. NOT acceptable)

Name: Frank Carbone

Office Address: 101 South Eola DR Apt 703

Orlando

(City)

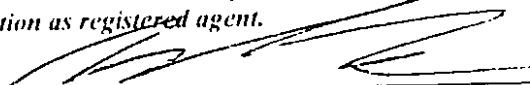
Florida

32801

(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 comply with 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:

Owner

Name and Address:

Title or Capacity:

Name and Address:

Owner

Frank Carbone

101 South Eola DR

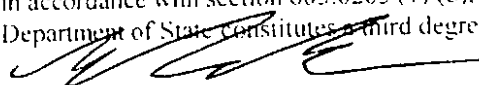
Apt 703 Orlando FL

32801

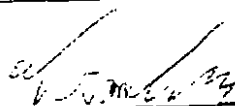
Use attachments if necessary)

Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody thereof 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)

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.



Signature of an authorized person



Frank Carbone

Typed or printed name of signer

STATE OF WYOMING
Office of the Secretary of State

I, ED MURRAY, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

FCA Media Solutions LLC

is a

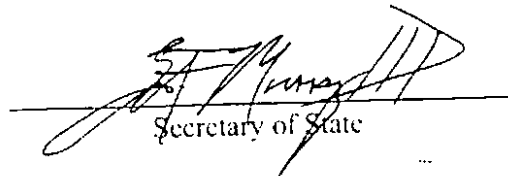
Limited Liability Company

formed or qualified under the laws of Wyoming did on **April 14, 2016**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2016-000711857**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 8th day of September, 2017 at 9:10 AM. This certificate is assigned 024057927.




Secretary of State

Electronic Confirmation

2017 OCT -6 P 3:17

024057927

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website <http://wyobiz.wy.gov> and following the instructions displayed under Validate Certificate.