M18000004164

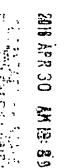
(Re	questor's Name)	
(Ad	dress)	
bA)	dress)	
	(Chaha Ein ID)	- 40
(Cit	y/State/Zip/Phone	∋ #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
· · · · · · · · · · · · · · · · · · ·		

Office Use Only



000312509050

04/30/18--01045--024 **125.00



LAN OZ 2015 J. HARRIS

COVER LETTER

TO:

Registration Section

Div	ision of Corporation	18			
SUBJECT:	RedCircle MediaL	LC			
		Name of I	Limited Liability Co	ompany	
The enclosed Existence, ar	"Application by For id check are submitte	eign Limited Liability Comp d to register the above refere	enced for Authorizati	ion to Tra ed liability	nsact Business in Florida," Certificate of company to transact business in Florida
Please return	all correspondence of	concerning this matter to the	following:		
	Adam Marefat				
	-	Na	ame of Person		
	 ,	Fi	rm/Company	·	
	7440SW 107t	hAVE #8203			
			Address		
	Miami FL 331	73			
		City/S	tate and Zip Code		
	redcircle4@gm	ail.com			
		E-mail address: (to be used	d for future annual	report not	ification)
For further is	nformation concernin	g this matter, please call:			
jar	edesguerra@gmail	.com	305 _at (30433	02
	Name o	of Contact Person	Area Code	Day	time Telephone Number
Div Reg P.C	ision of Corporation gistration Section Box 6327 lahassee, FL 32314			Division Registrat Clifton B 2661 Exc	of Corporations ion Section suilding centive Center Circle see, FL 32301
	a check for the follow \$125.00 Filing Fee	cing amount: \$\Bigsig \frac{1}{3}\frac{130.00}{3}\frac{150.00}{3}150.00	☐ \$155.00 Filing Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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:

ame unavailable, enter alternate na	ame adopted for the purpose of transacting business in Floric		ility Company," "L.L.C," or "L.LC.")
WY		3. 810830774	er, if applicable)
(Jurisdiction under the law of wh	nch foreign limited liability company is organized)	(Fin human	er, if applicable)
N/A			
	(Date first transacted business in Florida, if prior to re (See sections 605 0904 & 605 0905, F.S. to determine	egistration.) e penalty liability)	
7440SW 107thAVE #	#8203	6 7440SW 107thAVE #820	3
(Street Address of P	rincipal Office)	(Mailing Addr	cso)
Miami FL 33173		Miami FL 33173	
Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable)	75
X1	AdamMarefat		ျား (၂၈) (၂၈) မ
Name:			
Office Address:	7440SW 107thAVE #8203		5
	Miami	, Florida <u>33173</u>	
	(City)	Zip code	n 1981 Pres
ving been named as re ignated in this applica comply with the provise	tance: egistered agent and to accept service of po- tion, I hereby accept the appointment as- tions of all statutes relative to the proper of s of my position as registered agent.	s registered agent and agree to act	liability company at the p in this capacity. I further
signated in this applica comply with the provise	gistered agent and to accept service of po- tion, I hereby accept the appointment as- ions of all statutes relative to the proper of s of my position as registered agent.	s registered agent and agree to act and complete performance of my	tos in this capacity. I further
iving been named as re signated in this applica comply with the provise	gistered agent and to accept service of pa tion, I hereby accept the appointment as ions of all statutes relative to the proper o	s registered agent and agree to act and complete performance of my	tos in this capacity. I further
yving been named as re signated in this applica comply with the provise d accept the obligation. The name, title or cap	rgistered agent and to accept service of po- tion, I hereby accept the appointment as ions of all statutes relative to the proper of s of my position as registered agent. (Registered agent's statistical active and address of the person(s) who has	s registered agent and agree to act and complete performance of my d signature)	liability company at the pi in this capacity. I further duties, and I am familiar w
yving been named as re signated in this applica comply with the provise d accept the obligation	gistered agent and to accept service of po- tion, I hereby accept the appointment as ions of all statutes relative to the proper of s of my position as registered agent. (Registered agent's signal agent signal	s registered agent and agree to act and complete performance of my o	tos in this capacity. I further
wing been named as resignated in this application of the provised accept the obligation. The name, title or capa	rgistered agent and to accept service of position, I hereby accept the appointment as ions of all statutes relative to the proper of sof my position as registered agent. (Registered agent's statitive and address of the person(s) who has Name and Address; Adam Marefal	s registered agent and agree to act and complete performance of my d signature)	liability company at the pi in this capacity. I further duties, and I am familiar v
iving been named as resignated in this applicated in this applicated in the provised accept the obligation. The name, title or capacity:	rgistered agent and to accept service of position, I hereby accept the appointment as ions of all statutes relative to the proper of sof my position as registered agent. (Registered agent's statitive and address of the person(s) who has Name and Address; Adam Marefal 7440SW 107thAve #8203	s registered agent and agree to act and complete performance of my d signature)	liability company at the pi in this capacity. I further duties, and I am familiar v
ving been named as resignated in this applicationally with the provised accept the obligation. The name, title or caparity:	rgistered agent and to accept service of position, I hereby accept the appointment as ions of all statutes relative to the proper of sof my position as registered agent. (Registered agent's statitive and address of the person(s) who has Name and Address; Adam Marefal	s registered agent and agree to act and complete performance of my d signature)	liability company at the pi in this capacity. I further duties, and I am familiar v
wing been named as resignated in this application of the provised accept the obligation. The name, title or caparity:	rgistered agent and to accept service of position, I hereby accept the appointment as ions of all statutes relative to the proper of sof my position as registered agent. (Registered agent's statitive and address of the person(s) who has Name and Address; Adam Marefal 7440SW 107thAve #8203	s registered agent and agree to act and complete performance of my d signature)	liability company at the pi in this capacity. I further duties, and I am familiar v
ving been named as resignated in this applicationally with the provised accept the obligation. The name, title or caparity:	rgistered agent and to accept service of position, I hereby accept the appointment as ions of all statutes relative to the proper of sof my position as registered agent. (Registered agent's statitive and address of the person(s) who has Name and Address; Adam Marefal 7440SW 107thAve #8203	s registered agent and agree to act and complete performance of my d signature)	liability company at the pi in this capacity. I further duties, and I am familiar v
wing been named as resignated in this application of the provised accept the obligation. The name, title or caparity:	rgistered agent and to accept service of position, I hereby accept the appointment as ions of all statutes relative to the proper of sof my position as registered agent. (Registered agent's statitive and address of the person(s) who has Name and Address; Adam Marefal 7440SW 107thAve #8203	s registered agent and agree to act and complete performance of my d signature)	liability company at the pi in this capacity. I further duties, and I am familiar v
ving been named as reignated in this applicated in this applicated method accept with the provised accept the obligation. The name, title or capatity: Member/ Manager	gistered agent and to accept service of position, I hereby accept the appointment as ions of all statutes relative to the proper of sof my position as registered agent. (Registered agent's statitive and address of the person(s) who has Name and Address: Adam Marefat 7440SW 107th Ave #8203 Miami FL 33173	s registered agent and agree to act and complete performance of my d signature)	liability company at the p in this capacity. I further duties, and I am familiar s
oving been named as resignated in this applicated in this applicate comply with the provised accept the obligation. The name, title or capatity: Member/ Manager	rgistered agent and to accept service of position, I hereby accept the appointment assions of all statutes relative to the proper of sof my position as registered agent. (Registered agent's staticity and address of the person(s) who has Name and Address: Adam Marefalt 7440SW 107thAve #8203 Miami FL 33173	s registered agent and agree to act and complete performance of my disignature) signature) ss/have authority to manage is/are: Title or Capacity:	liability company at the p in this capacity. I further duties, and I am familiar v
Iving been named as resignated in this applicated in this applicate comply with the provised accept the obligation. The name, title or capatity: Member/ Manager Jse attachments if necessations acception of the companies of t	rgistered agent and to accept service of position. I hereby accept the appointment as ions of all statutes relative to the proper of sof my position as registered agent. (Registered agent's statictly and address of the person(s) who has Name and Address: Adam Marefalt 7440SW 107thAve #8203 Miami FL 33173 ssary) e of existence, no more than 90 days old, or	signature) signature) signature) signature signature signature signature authority to manage is/are: Title or Capacity:	liability company at the pin this capacity. I further duties, and I am familiar v
wing been named as resignated in this applicated in this applicated in this applicate omply with the provised accept the obligation. The name, title or capatity: Member/ Manager Jise attachments if necessaticated is a certificate is diction under the law	rgistered agent and to accept service of position, I hereby accept the appointment as ions of all statutes relative to the proper of sof my position as registered agent. (Registered agent's staticity and address of the person(s) who has Name and Address; Adam Marefat 7440SW 107thAve #8203 Miami FL 33173 ssary) e of existence, no more than 90 days old, of which it is organized. (If the certificate	signature) signature) signature) signature signature signature signature authority to manage is/are: Title or Capacity:	liability company at the pin this capacity. I further duties, and I am familiar v
Iving been named as resignated in this applicated in this applicate comply with the provised accept the obligation. The name, title or capatity: Member/ Manager Jse attachments if necessations acception of the companies of t	rgistered agent and to accept service of position, I hereby accept the appointment as ions of all statutes relative to the proper of sof my position as registered agent. (Registered agent's staticity and address of the person(s) who has Name and Address; Adam Marefat 7440SW 107thAve #8203 Miami FL 33173 ssary) e of existence, no more than 90 days old, of which it is organized. (If the certificate	signature) signature) signature) signature signature signature signature authority to manage is/are: Title or Capacity:	liability company at the pin this capacity. I further duties, and I am familiar v
The name, title or cap. Title or Capacity: Member/ Manager Attached is a certificate risdiction under the law the translator must be seen.	rgistered agent and to accept service of position, I hereby accept the appointment as ions of all statutes relative to the proper of sof my position as registered agent. (Registered agent's staticity and address of the person(s) who has Name and Address; Adam Marefat 7440SW 107thAve #8203 Miami FL 33173 ssary) e of existence, no more than 90 days old, of which it is organized. (If the certificate submitted)	signature) signature) sis/have authority to manage is/are: Title or Capacity: duly authenticated by the official hase is in a foreign language, a translate of (1) (b). Florida Statutes, I am awaits.	liability company at the pin this capacity. I further duties, and I am familiar values, and I am familiar values, and Address: Name and Address:
The name, title or cap. Title or Capacity: Member/ Manager Attached is a certificate risdiction under the law the translator must be seen.	rgistered agent and to accept service of position, I hereby accept the appointment as ions of all statutes relative to the proper of sof my position as registered agent. (Registered agent's staticity and address of the person(s) who has Name and Address; Adam Marefat 7440SW 107thAve #8203 Miami FL 33173 ssary) e of existence, no more than 90 days old, of which it is organized. (If the certificate	signature) signature) sis/have authority to manage is/are: Title or Capacity: duly authenticated by the official hase is in a foreign language, a translate of (1) (b). Florida Statutes, I am awaits.	liability company at the pain this capacity. I further duties, and I am familiar management with the painters of the analysis and Address: Name and Address: Eving custody of records in ion of the certificate under the
The name, title or cap. Title or Capacity: Member/ Manager Attached is a certificate risdiction under the law the translator must be seen.	rgistered agent and to accept service of position, I hereby accept the appointment as ions of all statutes relative to the proper of sof my position as registered agent. (Registered agent's staticity and address of the person(s) who has Name and Address; Adam Marefat 7440SW 107thAve #8203 Miami FL 33173 ssary) e of existence, no more than 90 days old, of which it is organized. (If the certificate submitted)	signature) signature) sis/have authority to manage is/are: Title or Capacity: duly authenticated by the official hase is in a foreign language, a translate of (1) (b). Florida Statutes, I am awaits.	liability company at the pain this capacity. I further duties, and I am familiar management with the painters of the analysis and Address: Name and Address: Eving custody of records in ion of the certificate under the

Typed or printed name of signee

STATE OF WYOMING Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

Red Circle Media LLC

is a Limited Liability Company

formed or qualified under the laws of Wyoming did on **December 10, 2015**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2015-000701475**.

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 23rd day of April, 2018 at 8:07 AM. This certificate is assigned 026260121.

Secretary of State

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.