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COVER LETTER

TO:

TO:	Registration Section Division of Corporations				
CHRI	FEMOR PRODUCTIONS,LLC				
SUBJ		imited Liability (Company		
	nclosed "Application by Foreign Limited Liability Compa ence, and check are submitted to register the above referen				
Please	e return all correspondence concerning this matter to the f	ollowing:			
	SEAN DINNEEN				
	Na	me of Person			
	FEMOR PRODUCTIONS,LLC				
	Fin	m/Company			
	2200 NW CORPORATE BLVD, SUITE 405	5			
		Address			
	BOCA RATON, FL 33431				
	City/Sta	nte and Zip Code			
	SEAN@FEMORPRODUCTIONS.COM				
	E-mail address: (to be used	for future annual	report no	ification)	
For fu	irther information concerning this matter, please call:				
	SEAN DINNEFN	561 at (221-56		
	Name of Contact Person	Area Code	Day	time Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division Registrat Clifton B 2661 Exc	of Corporations ion Section uilding centive Center Circle ce, FL 32301	
Enclos	sed is a check for the following amount: \$\Boxed{125.00}\$ \text{ Filing Fee } \Boxed{\Omega} \$	☐ \$155.00 Filin Certified Copy	g Fee &	■ \$160,00 Filing Fee, Cer of Status & Certified Copy	



October 23, 2018

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

To Whom it May Concern:

Attached, please find my application to register my Nevada LLC, <u>FeMor Productions</u>, <u>LLC</u>, with the Florida Division of Corporations.

On this application, you will note that I have not included an alternate name choice should FeMor Productions, LLC be taken. Additionally, please note that I am also the sole Member and Manager of <u>FeMor Productions II, LLC</u> - a Florida LLC already registered with the Division, which was previously known as FeMor Productions, LLC.

Please accept this as my formal request to allow the use of the name <u>FeMor</u>

<u>Productions, LLC</u> (without modification) for my Nevada LLC in the State of Florida.

Regards,

Marvin Samel

Founder

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:

 			
	name adopted for the purpose of transacting business in Flor		nability Company," "L.L.C," or "LL.C.")
NEVADA	high foreign limited liability company is organized)	3. 47-3393626	inber, if applicable)
(Addition line) in the state of the	about to eight in the company is organized,	,, 	
	(Date first transacted business in Florida, if prior to r (See sections 605 0904 & 605,0905, F.S. to determine	egistration)	
2200 NW Corporate B			I
2200 NW Corporate B	Principal Office)	6. 2200 NW Corporate Blvd	ddress)
Suite 405		Suite 405	
Boca Raton, FL 33431		Boca Raton, FL 33431	
			<u> </u>
Name and street addres	ss of Florida registered agent: (P.O. Box	NOT accentable)	7.00
Traine and <u>stroot agains.</u>	_	<u></u>	~i
Name:	Marvin Samel		ا ل
Office Address:	2200 NW Corporate Blvd, Suite 405		ਹ :-
	D. D.	23.43.1	
	Boca Raton (City)	, Florida 33431 (Zip o	
signated in this applica comply with the provis	egistered agent and to accept service of p ation, I hereby accept the appointment as ions of all statutes relative to the proper s of my position as registered agent	registered agent and agree to ac	at in this capacity. I further
signated in this application comply with the provis	tion, I hereby accept the appointment as ions of all statutes relative to the proper s of my position as registered agent	registered agent and agree to ac and complete performance of m	at in this capacity. I further
signated in this applica comply with the provised ad accept the obligation	tion, I hereby accept the appointment as ions of all statutes relative to the proper s of my position as registered agent (Registered agent's s	registered agent and agree to ac and complete performance of my ignature)	et in this capacity. I further y duties, and I am familiar v
signated in this applica comply with the provis ad accept the obligation	tion, I hereby accept the appointment as ions of all statutes relative to the proper s of my position as registered agent. (Registered agent's s acity and address of the person(s) who has	registered agent and agree to ac and complete performance of my ignature) s/have authority to manage is/are:	et in this capacity. I further y duties, and I am familiar v
signated in this applicated in this application of accept the obligation. The name, title or capatite or Capacity:	ions of all statutes relative to the proper s of my position as registered agent. (Registered agent's s acity and address of the person(s) who have a new Address:	registered agent and agree to ac and complete performance of my ignature)	et in this capacity. I further y duties, and I am familiar v
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signated in this application comply with the provised accept the obligation. The name, title or capacity: Title or Capacity: MANAGER Use attachments if necessal acceptance of the complete of the complet	Action, I hereby accept the appointment as ions of all statutes relative to the proper is of my position as registered agent. (Registered agent's sacity and address of the person(s) who has a Name and Address: Marvin Samel 2200 NW Corporate Blvd, \$405 Boca Raton, FL 33431 Sary) of existence, no more than 90 days old, of which it is organized. (If the certificate abmitted) of the Department of State constitutes a thing the constitutes at thing the constitutes a thing the constitutes at thing the constitutes at thing the constitutes at thing the constitutes at the constitutes at thing the constitutes at the con	ignature) s/have authority to manage is/are: Title or Capacity: duly authenticated by the official lets in a foreign language, a translet. (1) (b), Florida Statutes, I am aways and complete performance of my and c	Name and Address: having custody of records in ation of the certificate under

Typed or printed name of signee

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, Barbara K. Cegavske, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **FEMOR PRODUCTIONS**, **LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since November 6, 2014, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on October 22, 2018.

Bullara K. Cegerske

Barbara K. Cegavske Secretary of State

Electronic Certificate

Certificate Number: C20181022-0971