

MI9000001884

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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700324552337

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TALLMASSIE, FL

2019 FEB 14 AM 11:44

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700324552337
S. PRATHER



February 11, 2019

FL Division of Corporations
Registration Section
PO Box 6327
Tallahassee, FL 32314

Re: Foreign LLC Filing

To Whom It May Concern, following is our application to file in the state of FL along with the Letter of Good Standing from CA and a check for fees due.

If you have any questions at all please contact me, my details are below.

Thank you and have a great day!

Best,

A handwritten signature in black ink that reads "Kristie Ralph". The signature is fluid and cursive, with the first name "Kristie" and last name "Ralph" clearly distinguishable.

Kristie Ralph
Director of Operations
Office: 213-389-3472
Direct: 213-819-0492
Mobile: 508-863-9600
kristie@dlseventsllc.com

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DLS Events LLC
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:

Kristie Ralph
Name of Person

DLS Events LLC
Firm/Company

3780 Wilshire Blvd Suite 800
Address

Los Angeles CA 90010
City/State and Zip Code

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

For further information concerning this matter, please call:

Kristie Ralph 213 389-3472
Name of Contact Person at () 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:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- ☐ \$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

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. DLS Events LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
- DLS Festivals 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. California 3. 455060214
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)
4. April 2019
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 3780 Wilshire Blvd
(Street Address of Principal Office)
- Suite 800
- Los Angeles CA 90010
6. 3780 Wilshire Blvd
(Mailing Address)
- Suite 800
- Los Angeles CA 90010
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Northwest Registered Agent, LLC

Office Address: 7901 4th St N STE 300

St Petersburg, Florida 33702
(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 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.

See attached page

(Registered agent's signature)

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2019 FEB 14 AM 11:44
TALLAHASSEE, FL
STATE

~~ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY~~

ARTICLE I - Name:

The name of the Limited Liability Company is:

DLS Events LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Northwest Registered Agent, LLC.

Name

7901 4th St N STE 300

Florida street address (P.O. Box **NOT** acceptable)

St. Petersburg FL 33702

City

State

Zip

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..



Northwest Registered Agent, LLC.

Tom Glover

- Assistant Secretary

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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**CLERK OF STATE
TALLAHASSEE, FL**

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: **Name and Address:**

☒ Manager Name: David Solomon
☒ Member Address: 3780 Wilshire Blvd
Suite 800
Los Angeles CA 90010
☐ Other _____ ☐ Other _____

Title or Capacity: **Name and Address:**

☐ Manager Name: Allen Gilbert
☒ Member Address: 3780 Wilshire Blvd
Suite 800
Los Angeles CA 90010
☐ Other _____ ☐ Other _____

☐ Manager Name: Kristie Ralph
☐ Member Address: 3780 Wilshire Blvd
Suite 800
Los Angeles CA 90010
☒ Authorized
Person
☐ Other _____ ☐ Other _____

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized
Person
☐ Other _____ ☐ Other _____

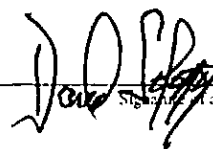
☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized
Person
☐ Other _____ ☐ Other _____

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized
Person
☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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)

10. 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
David Solomon

Typed or printed name of signer

2019 FEB 14 AM 11:45
FILED
CLERK OF THE
SOCIETY OF
SECRETARIES

State of California
Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: DLS EVENTS, LLC

FILE NUMBER: 201207610041
FORMATION DATE: 03/15/2012
TYPE: DOMESTIC LIMITED LIABILITY COMPANY
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to
exercise all of its powers, rights and privileges in the State of
California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this
certificate and affix the Great Seal
of the State of California this day of
November 27, 2018.

ALEX PADILLA
Secretary of State

NLH