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|                         | equestor's Name)   |                 |
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| (Ác                     | ddress)            |                 |
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| (Ad                     | ddress)            |                 |
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| - (Ci                   | ty/State/Zip/Phone | <del>?</del> #) |
| PICK-UP                 | WAIT               | MAIL            |
|                         |                    |                 |
| (Bu                     | usiness Entity Nan | ne)             |
|                         |                    |                 |
| (Do                     | cument Number)     |                 |
| Certified Copies        | Certificates       | s of Status     |
|                         | _                  |                 |
| Special Instructions to | Filing Officer:    |                 |
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Office Use Only



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# **COVER LETTER**

**TO:** Registration Section Division of Corporations

| SUBJECT:  | Activate Entert   | ainment Group              | LLC                             |   |
|---|---|----------------------------|---------------------------------|---|
|   | Name of Foreign   | n Limited Liabil           | ity Compa                       | any   |
| Dear Sir or Madam:                                      |   |                            |                                 |   |
| The enclosed applicati                                  | on, certificate and fee(s) a                                    | are submitted fo           | r filing.                       |   |
| Please return all corres                                | pondence concerning this  | s matter to the fo         | ollowing:                       |   |
| Greg Zalkin   |   |                            |                                 |   |
|   | Name of Person  |                            |                                 |   |
| Activate Entertainment C                                | iroup. LLC  |                            |                                 |   |
|   | Firm/Company  |                            |                                 |   |
| 309 NE 61st Street                                      |   |                            |                                 |   |
|   | Address   |                            |                                 |   |
| Miami, FL 33137   |   |                            |                                 |   |
|   | City/State and Zip Code   |                            |                                 |   |
| greg@activategrp.com                                    |   |                            |                                 |   |
| E-mail address: (to l                                   | be used for future annual                                       | report notificati          | on)                             |   |
| For further information                                 | n concerning this matter,                                       | please call:               |                                 |   |
| Greg Zalkin   |   | 786                        | 3385540                         |   |
| Name  | of Person   |                            | & Daytime                       | e Telephone Number  |
| Registration Se<br>Division of Co<br>Clifton Buildir    | rporations<br>ng<br>e Center Circle                             |                            | Registra<br>Division<br>P.O. Bo | NG ADDRESS:<br>ation Section<br>of Corporations<br>ox 6327<br>ssee, Florida 32314 |
| Enclosed is a check for \$25 Filing Fee  CR2E055 (9/15) | or the following amount \$30 Filing Fee & Certificate of Status | :<br>\$55 Filin  Certified | ~                               |   |

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT **BUSINESS IN FLORIDA**

## **SECTION I (1-4 must be completed)**

| 1. Name of limited liability Company as it appears   | s on the records of the Flor   | ida Department of   |
|--|--|---|
| State: Activate Entertainment Group LLC  |  |   |
| Enter new principal office address, if applicable:   | 309 NE 61st Street   |   |
| ( <u>Principal office address</u><br><u>MUST BE A STREET ADDRESS</u> )   | Miami, FL 33137  |   |
| Enter new mailing address, if applicable:  | 309 NE 61st Street   | 6707  |
| ( <u>Mailing address</u><br><u>MAY BE A POST OFFICE BOX</u> )  | Miami, FL 33137  | JAK O JAK   |
| 2. The Florida document number of this limited lia   | bility company is: M19000  | 0010737   |
| 3. Jurisdiction of its organization: Miami-Dade Co   | ounty, Florida Pela  | ware  |
| <ul> <li>Jurisdiction of its organization: Miami-Dade Co</li> <li>Date authorized to do business in Florida: 11/1.</li> </ul>  | 4/19 11/5/2019   | <u> </u>  |
| SECTION II (5-9 complete only the applicable of  | changes)   |   |
| 5. New name of the limited liability company: (mus   | t contain "Limited Liability   | Company, ""L.L.C.," or "LLC.")  |
| (If name unavailable, enter alternate name adopted copy of the written consent of the managers or manust contain "Limited Liability Company," "L.L.C   | naging members adopting t  |   |
| 6. If amending the registered agent and/or registere registered agent and/or the new registered office agent   |  | cords, enter the name of the new                                      |
| Name of New Registered Agent: Greg Zalkin  |  |   |
| New Registered Office Address: 309 NE 61st Stre  |  |   |
| Mia  |  | orida Street Address  |
|  | City   | , Florida Zip Code  |
| New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered ages the provisions of all statutes relative to the proper and accept the obligations of my position as regist document is being filed to merely reflect a change liability company has been notified in writing of the | nt and agree to act in this cand complete performance ered agent as provided for in the registered office add is change. | of my duties, and I am familiar with in Chapter 605, F.S. Or, if this |

| <u>litle/ Capacity</u> <u>Name</u> |             | <u>Address</u>                         | Type of Action |
|------------------------------------|-------------|--|----------------|
| MGRM, AP Greg Zalkin               | Greg Zalkin | 309 NE 61st Street, Miami, FL 33137    | ⊠Add           |
|                                    |             |  | Remov          |
| IGRM, AP                           | Zach Holt   |  | Add            |
|                                    |             | 320 NE 61st Street, Miami Beach, FL 33 | 817<br>⊠ Remov |
|                                    |             |  | Add            |
|                                    |             |  | Remov          |
|                                    | <u> </u>    |  | Add            |
|                                    |             |  | Remove         |
|                                    |             |  | Add            |
|                                    |             |  |                |

Filing Fee: \$25.00