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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name: REGISTERED AGENTS INC.

Account Number: 120090000081 : (307)200-2803 Phone Fax Number : (855)330-1010

> **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:_

Foreign Limited Liability Company Sound Management & Marketing LLC

Certificate of Status	0	
Certified Copy	0	
Page Count	04	
Estimated Charge	\$125.00	



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:

COMPANY TO TRANSACT BU	ISINESS IN THE STATE OF FLORIDA:			
Sound Manage	ment & Marketing LLC			
(Name of Foreign	Limited Liability Company; must include "Limited	I Liability Company," "L.L.C.," or "LLC	.")	
(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flor	ida. The alternate name must include "Limited I	Liability Company," "L.L.C," or "LEC	
Delaware		86-3023683		
2. (Jurisdiction under the law of which foreign limited hability company is organized)		3. (FEI number, if applicable)		
4,				
	(Date first transacted business in Florida, if prior to r (See sections 605,0904 & 605,0905, F.S. to determine	registration.) ne penalty limbility)		
5. 7901 4th St N (Street Address of Principal Office)		7901 4th St	t N	
5. (Street Address of)	Principal Office)	0. (Mailing A		
STE 300		STE 300		
512 300				
St. Petersb	urg FL 33702	St. Petersbu	rg FL 33702	
7 Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable)	% On [
7. Name and street address	s of Florate registered agent. (F.O. Don	or acceptance,	Sa B	
	Registered Agent	s Inc	15 S	
Name:	Tregistered Agent		29 128	
7901 4th St N STE 300				
Office Address:	1002 1010011			
	St. Petersburg	, Florida 337	02	
	(City)		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. 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]: Name and Address: Name and Address: Title or Capacity: Title or Capacity: Name: Timothy Sheets Manager Manager | Address: PO BOX 597 Member Address: Member Deerfield Beach, FL 33443 Authorized Authorized Person Person Other____ Other____ Other____ Other_ Manager Manager Name: ______ Member Address: _____ Member Address: Authorized ■Authorized Person Person Other____ Other___ Other _____ Other_ Name: Name: _____ Manager Manager Member 1 Address: Member Address: Authorized ☐ Authorized Person Person Other_____ Other____ Other____ Other_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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 Riley Park

Typed or printed name of signee

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SOUND MANAGEMENT & MARKETING LLC" IS

DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE FIFTH DAY OF APRIL, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SOUND MANAGEMENT & MARKETING LLC" WAS FORMED ON THE EIGHTEENTH DAY OF MARCH, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

e at corp delaware gov/aut

Authentication: 202893855

Date: 04-05-21