

4/30/2021

Division of Corporations

M210001740143

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

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

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**Foreign Limited Liability Company
HOOK STUDIOS LLC**

Certificate of Status	0
Certified Copy	1
Page Count	04
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Handwritten signature/initials: LJS 5/3/21

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. HOOK STUDIOS LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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. Michigan

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 30-0349758

(FEI number, if applicable)

4. 06/01/2021

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 113 1/3 W Liberty Street

(Street Address of Principal Office)

Ann Arbor, MI 48104

6. 113 1/3 W Liberty Street

(Mailing Address)

Ann Arbor, MI 48104

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324

(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.

C T Corporation System

By: Rachel O'Connor

Rachel O'Connor - Assistant Secretary

(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]:

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

☐ Manager Name: Steven M Watts II

☒ Member Address: 113 1/3 W Liberty Street

☐ Authorized Ann Arbor, MI 48104

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Christopher M Watts

☒ Member Address: 12910 Culver Blvd

☐ Authorized Los Angeles, CA 90066

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

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

☐ Manager Name: Nicholas J Watts

☒ Member Address: 113 1/3 W Liberty Street

☐ Authorized Ann Arbor, MI 48104

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: Aaron B Schwartz

☒ Member Address: 12910 Culver Blvd

☐ Authorized Los Angeles, CA 90066

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)

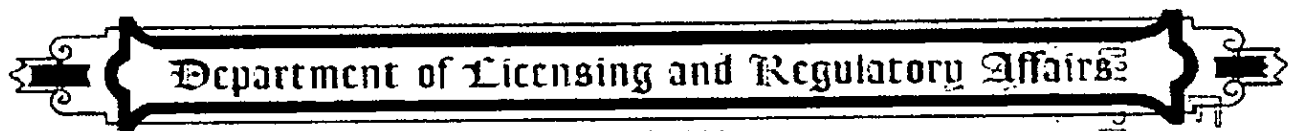
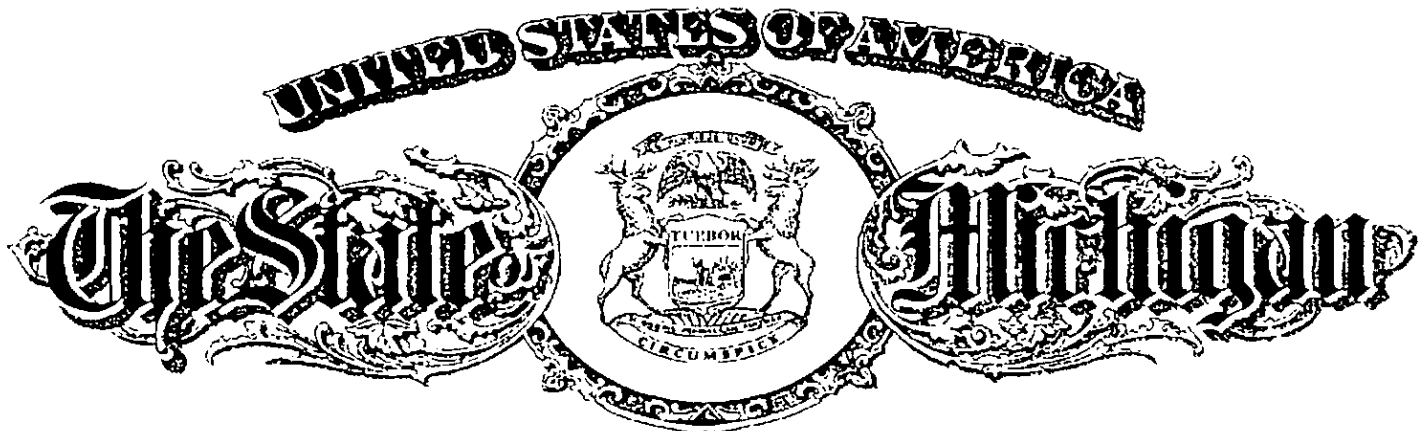
10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Sandra L. Watts

Signature of an authorized person

Sandra L. Watts

Typed or printed name of signer



This is to Certify That
HOOK STUDIOS LLC

was validly authorized on December 29, 2005, as a Michigan DOMESTIC LIMITED LIABILITY COMPANY,
and said limited liability company is validly in existence under the laws of this state and has satisfied its
annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23 to attest to the fact that the company is
in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit
given it in every court and office within the United States.



Sent by electronic transmission

Certificate Number: 21040570906

In testimony whereof, I have hereunto set my hand,
in the City of Lansing, this 22nd day of April, 2021.

Linda Clegg, Director

Corporations, Securities & Commercial Licensing Bureau