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To:

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From:

: REGISTERED AGENTS INC. Account Name

Account Number : I20090000081 Phone

: (307)200-2803

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.

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Foreign Limited Liability Company Savant Media Group, LLC

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JUL 25 1021

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. Savant Media Group, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC." 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," "LLC." or "LLC.")

2. Virgin Islands
((Jurisdiction under the law of which foreign limited liability company is organized)

3. 66-0653709

3. 66-0653709

5. P901 4th St N

(Street Address of Finit transacted business in Florida. If prior to registration.)
(See sections 6/5 0/604 & 6/6 0/905, F.S. to determine penalty, liability)

5. PO Box 37

(Street Address of Finitipal Office)

STE 300

St. Petersburg FL 33702

St. John VI 00831-0037

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

Registered Agents Inc.

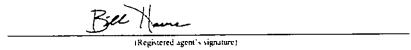
Registered agent's acceptance:

Office Address:

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.

7901 4th St N STE 300

St. Petersburg



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: Name and Address: Title or Capacity: Name: Andrew Clausen Manager Name: 43 Highfields Manor Address: Member Member [7] Washington NE37 1ER, UK Authorized Authorized Person Person Other____ Other___ Other Other_ Manager Manager Name: _____ Manager Member | Member Address: ______ Authorized Authorized Person Person Other_ Other____ Other Other Manager Name: Manager Member 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 fitting 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. Riley Park

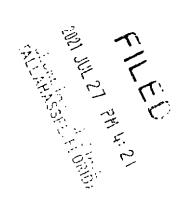
Lyped or printed name of signee



Government of The United States Virgin Islands

-O-

Office of the Lieutenant Governor Division of Corporations & Trademarks



CERTIFICATE OF GOOD STANDING

To Whom These Presents Shall Come:

I, the undersigned Lieutenant Governor the United States Virgin Islands, do hereby certify that **SAVANT MEDIA GROUP, LLC** has filed in the Office of the Lieutenant Governor the requisite annual reports and statements as required by the Virgin Islands Code, and the Rules and Regulations of this Office. In addition, the aforementioned entity has paid all applicable taxes and fees to date, and has a legal existence not having been cancelled or dissolved as far as the records of my office show.

Wherefore, the aforementioned entity is duly formed under the laws of the Virgin Islands of the United States, is duly authorized to transact business, and, is hereby declared to be in good standing as witnessed by my seal below. This certificate is valid through June 30th, 2022.

Entity Type: Domestic Limited Liability Company

Entity Status: In Good Standing Registration Date: 04/28/2000

Jurisdiction: United States Virgin Islands, United States

Witness my hand and the seal of the Government of the United States Virgin Islands, on this 21st day of July, 2021.

> Tregenza A. Roach Lieutenant Governor United States Virgin Islands

Trying A. Roul

