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2021-07-27 07:55:04 CST

From: Kimberly Laughrey

## Division of Corporations

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From:

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C 1.1		
rmall	Address:	

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## Foreign Limited Liability Company **Proximity Productions LLC**

Certificate of Status	0
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To: 18505176383 - Page: 3 of 5 2021-07-27 07:55:04 CST 12122023573 From: Kimberly Laughrey

## 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 TOTRANSACTBUSINESS IN THE STATEOFF LORIDA:

	ne adopted for the purpose of transacting business in blorida. The		
Delaware	3	36-4904973	
(Jurisdiction under the law of whic	ch foreign limited liability company is organized)	(FLI nucl)	n, it appliestile)
	(Date first transacted business in Fioritia, if prior to jugistrate	m )	
	(See sections (4)5 0904 & 605,0902; F.S. to determine point)	y liability)	
4000 Warner Blvd.		4000 Warner Blvd.	
cet Address of Principal Ortice)	θ.	(Mailing Address)	
Burbank, CA 91522		Burbank, CA 91522	
	<u>.</u>		<u>N. N.</u>
Name and street address  Name:	of Florida registered agent: (P.O. Box. <u>NOT</u> C T Corporation System	acceptable)	FILED UL 27 MIN HANN OF LIA UN LIEUFLON
Office Address:	1200 South Pine Island Road		10: 25 ATE PROA
	Plantation	33324 , Florida	
	(City)	(Zip code)	

VP & Asst. Secy.

Page: 4 of 5

11 057 - 1/21/2020 Weltery Knower Geline

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:	Title or Capacity:	Name and Address:
□ Manager	Name: WB Studio Enterprises Inc.	□ Manager	Name:
X Member	4000 Warner Blvd. Address:	□ Member	Address:
(i) Authorized	Burbank, CA 91522	(I) Authorized	
Person		Person	
□ Other	□ Other	_ Other	
Manager	Name:	∏ Manager	Name:
_ Member	Address:	☐ Member	Address:
Authorized		Authorized	
Person		Person	
Other	Otter	_ Other	TO(he)
Manager [7]	Name:	_ Manager	Name:
_ ☐ Member	Address:	□ Member	Address:
☐ Authorized		Z Authorized	
Person		Person	
Other	□Other	Cother	

<u>Important Notice:</u> 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.

Daniel Weinberger	
Princi West Major (1912) 1207 12 40703	
	Signature of an amborized person
Daniel Weinberger	
	Typed or printed name of signed

## Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "PROXIMITY PRODUCTIONS 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 TWENTY-SEVENTH DAY OF JULY, A.D. 2021.

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

Authentication: 203767493

Date: 07-27-21