Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210003132483)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Tc:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA00000023 Phone: (614)280-3338 Fax Number: (954)298-0845

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

Email	Addross:_		
-------	-----------	--	--

Foreign Limited Liability Company Transmit.live, LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu

Help

From: Ranae McGraw

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0302, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FORESON. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA Transmit.live, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," L.L.C., or "LLC.")

(result of rotally families and a source)		5°	15 P	·×id
(If name unavailable, enter electrate name edopted for the purpose of transacting business in Flor	ilda. The alternate name must include "l	annibid Liability Co nearly.	741.055 ILC	; لا (". مسيب
New York	81-4549627	7>1 TT.	, 20 (M)	1
(Darisdiction under the law of which foreign limited hability company is organized)		(Plat number, of applicable) (7) (7) (7) (7)	PH	
4. (Date first transacted basiness in Florids, if pilot to n (See sections 605 0504 & 605,0505, F.S. to determin	egistimiers) c penalty indiaty)	-	STATE STATE	
222 NW 24th St.	222 NW 24th St.			
5. (Street Address of Principal Office)	(Mailing Adilects)			
Suite 402	Suite 402			
Miami, FL 33127	Miami, FL 33127			

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

Naine:	Ricardo Bueso	
Office Address:	3737 Condor Ct.	
	Weston	33331
	(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.

Page: 4 of 6

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:	
≅Manager	Name:	■Manager	Name:
☐ Member	Address: 222 NW 24th St., Ste 402	□Member	Address: 222 NW 24th St., Ste 402
Authorized	Miami, FL 33127		Miami, FL 331.27
Person		Person	2021 I
Other	□Other	□Other	22 72
⊞Manager	Name: Scott Young	Manager	Name: Jason Stein O
□Member	Address: 222 NW 24th St., Stc 402	E Member	Address: 222 NW 240, St., 5te 402
∐Authorized	Mianu, FL 33127	• DAuthorized	Miami, FL 33127 771 0
Person		Person	
□Other	□Other	□Other	□Othet
[]Manager	Nume:	[]Manager	Name:
□Member	Address:	□Member	Address:
□ Authorized		OAuthorized	
Person		Person	
[]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 \$.817.155, F.S.

	Signals er of an wather our	nd person
Ricardo Bueso		en de la companya del la companya de
•	Typed or punted reinte	at Marce

From: Range McGraw

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I. ROSSANA ROSADO. Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

TRANSMIT.LIVE, LLC Entity Name:

DOS ID Number:

5016167

DOMESTIC LIMITED LIABILITY COMPANY STEELSTING Entity Type:

EXISTING **Entity Status:**

Date of Initial Filing with DOS: 09/29/2016

CURRENT Statement Status:

09/30/2022 Statement Due Date:

I certify that the following is a list of documents on file in the Department of State for said entity:

ARTICLES OF ORGANIZATION Document Type:

Date of Filing: 09/29/2016

TRANSMITLLIVE, LLC Entity Name:

CERTIFICATE OF CHANGE Document Type:

Date of Filing: 06/07/2017

CERTIFICATE OF PUBLICATION Document Type:

08/30/2017 Date of Filing:

CERTIFICATE OF CHANGE Document Type:

09/28/2020 Date of Filing:

Page 1 of 2

Document Type:

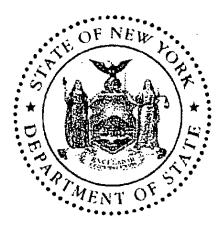
BIENNIAL STATEMENT

Date of Filing:

08/19/2021

SECRETARY OF STA

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on August 19, 2021 at 08:06 P.M.

ROSSANA ROSADO, Secretary of State

Brandon Co Heylan

By Brendan C. Hughes Executive Deputy Secretary of State

Authentication Number: 100000258566 To Verify the authenticity of this document you may access the Division of Corporation's Document Authentication Website at http://ecorp.dos.ny.gov

Page 2 of 2