M22000002061

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
	-
Special Instructions to Filing Officer:	

Office Use Only



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2022 FEB -9 AM 9: 35

2022 [EB -- 9 P]; 2: 59

S. ROBERTS FEB 0 9 2022

Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com



ORDER FORM

Florida Department of State

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com

850-245-6051

FROM

Melissa Moreau mmoreau@incserv.com 850.656.7953

REQUEST DATE 2/9/2022

PRIORITY Regular Approval

OUR REF # (Order ID#) 997151

ORDER ENTITY___

APPLE STUDIOS LLC

P	LEAS	E PER	FORM	THE F	OLLO	NING	SERVI	CES:		
-		ECT						•	 	

APPLE STUDIOS LLC (FL)

File the attached foreign qualification document

NOTES:

\$125.00 Authorized (Name Reservation attached)

Email address for annual report reminders: Jean@clasinfo:com-

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely, via E-mail

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Wednesday, February 9, 2022



February 7, 2022

INCORPORATING SERVICES, LTD.

The name APPLE STUDIOS LLC has been reserved for 120 days beginning February 4, 2022. The reservation number is R22000000028 and this reservation is **NONRENEWABLE**.

A reservation is not a grant of authority to use the name. It is only a withholding of a name from its availability for use by another. When the proposed document is submitted, the name will **AGAIN** be checked against the records of the Division and if still no conflict exists and all other requirements are fulfilled, the reserved name shall be filed as the entity name.

The Division of Corporations is a ministerial filing office and may not render any legal advice. The Division does not adjudicate the legality of any corporate name or arbitrate disputes between entities. You may wish to review other laws such as common law rights, including rights to a trade name; United States Code, Federal Trademark Act, Section 1051 (Lantham Act); Chapter 495, Florida Statutes, Registration of Trademarks and Service Marks (Florida Trademark Act); and Section 865.09, Florida Statutes (Fictitious Name Act).

If someone else submits the document for filing, it must have a copy of this letter attached.

Should you have any questions regarding this matter, please telephone (850) 488-9000, the Name Availability Section

Neysa Culligan Letter number: 222A00002935

Account number: I20050000052 Amount charged: 25.00

SECRETARY OF STATE

STATE OF FLORIDA SECRETARY OF STATE APPLICATION TO RESERVE A NAME

2022 FEB -4 AM 8: 50 1

1. The name to be reserved:

Apple Studios LLC

2. Name, address, and signature of applicant:

C T Corporation System 1200 South Pine Island Road Plantation, Florida 33324

Date: 02/03/2022

Jean Malcomson, Assistant Secretary of C T Corporation System

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

IN COMPLANCE WITH SECTION (05:0902, FLORIDA STATUTES THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANYTOTRANSACT BUSINESS IN THE STATE OF FLORIDA

name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flor	ida. The alternate name must include "Limited Liabili	ty Company," "L.L.C," or "LLC				
Delaware		82-5500966					
(Jurisdiction under the law of wh	nich fiveign limited liability company is organized)	3					
Upon Filing							
	(Date first transacted business in Florida, if prior to re (See sections 605 0904 & 605 0905; F.S. to determine	gistration (e penalty liability)	_				
8600 Hayden Place		6. (Mailing Address)					
ect Address of Principal Office)	· , · · · ·	6. (Mailing Address)					
Culver City, CA 90232		Culver City, CA 90232					
Name:	s of Florida registered agent: (P.O. Box C T Corporation System	NOT acceptance	K 6-				
		•	الي. ب				
Office Address:	1200 South Pine Island Road		- ω υ				
Office Address:	Plantation	33324					
Office Address:		. Florida 33324 (Zip code)					
egistered agent's accept (aving been named as re- esignated in this applican (comply with the provisi	Plantation (City)	. Florida (Zip code) rocess for the above stated limited lia. registered agent and agree to act in t	::. On bility company at the phis capacity. I furthe.				

(Registered agent's signifiate)

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: Title or Capacity: Name and Address: Title or Capacity: Name: _____Wong ■ Manager Name: _____ □Manager Address: 8600 Hayden Place □Member □Member Address: Culver City, CA 90232 □ Authorized □ Authorized Person Person Other____ □Other____ □ Other Other Name: □Manager □Manager Name: □Member Address: □Member Address: _____ ☐ Authorized □ Authorized Person Person Other____ □Other__ □Other____ Other____ □Manager □Manager □Member □Member Address: _____ 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 Jamie Wong, Manager

Typed or printed name of signee

Page 1



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

DELAWARE, DO HEREBY CERTIFY "APPLE STUDIOS 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 EIGHTH DAY OF FEBRUARY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "APPLE STUDIOS LLC" WAS FORMED ON THE SEVENTH DAY OF MAY, A.D. 2018.

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

Authentication: 202609081

Date: 02-08-22