M98000001196



ACCOUNT NO. : 07210000032

REFERENCE :

997161

4332951

AUTHORIZATION

COST LIMIT

ORDER DATE : October 15, 1998

ORDER TIME : 2:45 PM

ORDER NO. : 997161-005

CUSTOMER NO: 4332951

800002666018--5

CUSTOMER: Mr. David K. Hirshberg

Bricker & Eckler

100 South Third Street

Columbus, OH 43215

FOREIGN FILINGS

NAME: BETH-GLO RECORDS LLC

XXXX_ QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janice Vanderslice DIVISION OF CORPORATION

98 OCT 16 PM 3: 31

Name Availability

Document Examiner

Updater

Updater Verifyer

Acknowledgemen

W. P. Verifyer

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	C	Name of foreign lin	mited I	iability company)		
. Ohic)		3.			
(Juriso	diction under the law of which foreign any is organized)	limited liability	··*·	(FEI number, if	applicabl	e)
9/18	·	· .	5	Perpetual		
	(Date of Organization)		(I e:	Ouration: Year limited liabilitists or "perpetual")	ty compa	ny will cease to
. Upon	n filing this application		-			
	(Date first transacted busine	ss in Florida. (See	section	ns 608.501, 608.502, and 817.	.155, F.S.)
. 901	N.W. 11th Avenue					
Fort	Lauderdale, Florida 333			·		
		(Change address a	of prine	cipal office)		
	ame, title, and business address anage the foreign limited liability	of each managi ty company in	ing m Floric	ember[MGRM] or mana la: (attach additional pag		cessary)
	anage the foreign limited liability	of each managi	ing m Floric	ember[MGRM] or mana		-
	anage the foreign limited liabili	of each managi ty company in TITLE: Managing	ing m Floric	ember[MGRM] or mana la: (attach additional pag		cessary)
	anage the foreign limited liability NAME & ADDRESS: C.E. Glover	of each managi ty company in TITLE: Managing Member	ing m Floric	ember[MGRM] or mana la: (attach additional pag		cessary)
	nage the foreign limited liability NAME & ADDRESS: C.E. Glover 901 N.W. 11th Avenue	of each managi ty company in TITLE: Managing Member	ing m Floric	ember[MGRM] or mana la: (attach additional pag		cessary)
	nage the foreign limited liability NAME & ADDRESS: C.E. Glover 901 N.W. 11th Avenue	of each managi ty company in TITLE: Managing Member	ing m Floric	ember[MGRM] or mana la: (attach additional pag		cessary) TITLE:
	nage the foreign limited liability NAME & ADDRESS: C.E. Glover 901 N.W. 11th Avenue	of each managi ty company in TITLE: Managing Member	ing m Floric	ember[MGRM] or mana la: (attach additional pag		cessary)
	nage the foreign limited liability NAME & ADDRESS: C.E. Glover 901 N.W. 11th Avenue	of each managi ty company in TITLE: Managing Member	ing m Floric	ember[MGRM] or mana la: (attach additional pag		cessary) TITLE:
	nage the foreign limited liability NAME & ADDRESS: C.E. Glover 901 N.W. 11th Avenue	of each managi ty company in TITLE: Managing Member	ing m Floric	ember[MGRM] or mana la: (attach additional pag		Cessary) TITLE: 98 OCT 16
	nage the foreign limited liability NAME & ADDRESS: C.E. Glover 901 N.W. 11th Avenue	of each managi ty company in TITLE: Managing Member	ing m Floric	ember[MGRM] or mana la: (attach additional pag		cessary) TITLE: DIVISION OF CORFU 90 OCT 16 PM
	nage the foreign limited liability NAME & ADDRESS: C.E. Glover 901 N.W. 11th Avenue	of each managi ty company in TITLE: Managing Member	ing m Floric	ember[MGRM] or mana la: (attach additional pag		Cessary) TITLE: 98 OCT 16

UNITED STATES OF AMERICA, STATE OF OHIO, OFFICE OF THE SECRETARY OF STATE.

I, Bob Taft, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show BETH-GLO RECORDS LLC, an Ohio Limited Liability Company, Registration No. 1032376, was filed in this office on September 18th, 1998 and is currently in FULL FORCE AND EFFECT upon the records of this office.



WITNESS my hand and official seal at Columbus, Ohio on October 13, 1998

Bob Taft

Bob Taft Secretary of State SECRETARY OF STATE
DIVISION OF CHREURATIONS

98 OCT 15 FM 3: L9

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	The name of the Limited Liability Company is:	
	Beth-Glo Records LLC	
2.	The name and the Florida street address of the registered agent and office are:	
	Corporation Service Company (Name)	
	1201 Hays Street Florida street address (P.O. Box NOT ACCEPTABLE)	
	Tallahassee, FL 32301 City/State/Zip	

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

By: Carol K. Dolor (Signature)

SECRETARY OF STATE DIVISION OF CORPORATION

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of Beth-Glo Rec	cords LLC
certifies:	-
1) the above named limited liability company has at least one member;	
2) the total amount of cash contributed by the member(s) is	\$ 500.00
3) if any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto.) and	\$ -0-
4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is (This total includes amounts from 2 and 3 above.)	\$_500.00
Signature of a member or an authorized representative of a memb (In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) C.E. Glover Typed or printed name of signee	SECRETARY OF STATE DIVISION OF CORPORATIONS 98 OCT 16 PM 3: 49

Filing Fee: \$250.00 for Application and Affidavit