

Secretary of State

LLC-5

Application to Register a Foreign Limited Liability Company (LLC)

201907710062

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Secretary of State State of California

MAR 0 8 2019

IMPORTANT — Read Instructions before completing this form.

Must be submitted with a current Certificate of Good Standing issued by the government agency where the LLC was formed. See Instructions.

Filing Fee - \$70.00

Copy Fees - First page \$1.00; each attachment page \$0.50; Certification Fee - \$5.00

Noto: Registered LLCs in California may have to pay minimum \$80 California Franchise Tax Board each year. For more informa https://www.ftb.ca.gov.	ition, go to	Space For Office U	lse Only
1a. LLC Name (Enter the exact name of the LLC as listed on your attached Certificate of Good Standing.)			
Action Film Parthers	UC		
1b. California Alternate Name, If Required (See Instructions – Only enter an alternate name if the LLC name in 1a not available in California.)			
2. LLC History (See Instructions – Ensure that the formation date and jurisdiction match the attached Certificate of Good Standing.)			
a. Date LLC was formed in home jurisdiction (MM/DD/YYYY) b. Jurisdiction (State, foreign country or place where this LLC is formed.) O//O//2018			
c. Authority Statement (Do not alter Authority Statement)	3		· · · · · · · · · · · · · · · · · · ·
This LLC currently has powers and privileges to conduct business in the state, foreign country or place entered in Item 2b.			
3. Business Addresses (Enter the complete business addresses. Items 3a and 3b cannot be a P.O. Box or "in care of" an individual or entity.)			
a. Street Address of Principal Executive Office - Do not enter a P.O. Box 1086/ Moorpark St. #214 b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box	City (no abbreviations) Tolyica Lake	State C:A	Zip Code 9/602
b. Street Address of Principal Office in California, if any - Do not enter a P.O. Box	City (no abbreviations) Toluca Lake	State CA	Zip Code 9/602
c. Mailing Address of Principal Executive Office, if different than item 3a	City (no abbreviations)	State	Zip Code
4. Service of Process (Must provide either Individual OR Corporation.) INDIVIDUAL – Complete Items 4a and 4b only. Must include agent's full name and California street address.			
a. Cailfornia Agent's First Name (if agent is not a corporation)	Middle Name Las	st Name / //km	Suffix
b. Street Address (if agent is not a curporation) - Do not enter a P.O. Box 10861 Moorpark St. #214	City (no abbreviations) Tolyca Lake	State CA	Zip Code 9/602
CORPORATION - Complete Item 4c only. Only include the name of the registered agent Corporation.			
c. California Registered Corporate Agent's Name (if agent is a corporation) Do no	ot complete Item 4a or 4b		·
5 Read and Sign Below (See Instructions Title not required.)			

I am authorized to sign on behalf of the foreign LLC.

Type or Print Name



NORTH CAROLINA Department of the Secretary of State

CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, Elaine F. Marshall, Secretary of State of the State of North Carolina, do hereby certify that

ACTION FILM PARTNERS LLC

is a limited liability company duly formed, and existing under the laws of the State of North Carolina, having been formed on 1st day of January, 2018

I FURTHER certify that, as of the date of this certificate, (i) the said limited liability company is not dissolved under the terms of its articles of organization, (ii) the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina, (iii) that said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act, (iv) that this office has not filed any decree of judicial dissolution, articles of dissolution, articles of merger, or articles of conversion for said limited liability company.





Scan to verify online.

Certification# 104053244-1 Reference# 15052605- Page: 1 of 1 Verify this certificate online at http://www.sosnc.gov/verification

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 5th day of March, 2019.

Elaine I Marshall

Secretary of State

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