

STATE OF GEORGIA

Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

CERTIFICATE OF AUTHORITY

I, **Brad Raffensperger**, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

Arclight Entertainment LLC

a Foreign Limited Liability Company

has been duly formed under the laws of **Delaware** and has filed an application meeting the requirements of Georgia law to transact business as a **Foreign Limited Liability Company** in this state.

WHEREFORE, by the authority vested in me as Secretary of State, the above **Foreign Limited Liability Company** is hereby granted, on **04/22/2021**, a certificate of authority to transact business in the State of Georgia as provided by Title 14 of the Official Code of Georgia Annotated. Attached hereto is a true and correct copy of said application.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on **05/20/2021**.



Brad Raffensperger

Brad Raffensperger
Secretary of State



Secretary of State

OFFICE OF SECRETARY OF STATE
CORPORATIONS DIVISION
2 Martin Luther King Jr. Dr. SE
Suite 313 West Tower
Atlanta, Georgia 30334
(404) 656-2817
sos.georgia.gov/corporations

RECEIVED
SECRETARY OF STATE
INTAKE DIVISION

2021 APR 22 AM 9:06

APPLICATION FOR CERTIFICATE OF AUTHORITY FOR FOREIGN LIMITED LIABILITY COMPANY

IMPORTANT: Please provide the entity's primary email address when completing this form.

Primary Email Address: melfes@llpla.com

NOTICE TO APPLICANT: PRINT PLAINLY OR TYPE REMAINDER OF THIS FORM

1.	Arcight Entertainment LLC			
	Name of Limited Liability Company		Name Reservation Number (Optional)	
	3/15/2020			
	Date business commenced (or proposed) in Georgia (NOTE: If date provided here is more than 30 days prior to the effective date of this application, a \$500 penalty plus fees must be paid. Penalty is statutory and cannot be waived by Secretary of State.)			
2.	Larry Levinson			
	Name* of Filing Person			
	500 S Sepulveda Blvd, Ste 301	Los Angeles	CA	90049
	Address	City	State	Zip Code
	melfes@llpla.com	310.889.1600		
	Filer's Email Address	Telephone Number		
3.	Arcight Entertainment LLC			
	Name of Limited Liability Company in State or Country of Formation			
	Delaware	09/11/2019		
	Jurisdiction (Home State or Country)	Date of Formation in Home State or Country	Period of Duration	
4.	500 S Sepulveda Blvd, Ste 301	Los Angeles	CA	90049
	Address of Principal Place of Business	City	State	Zip Code
5.	PARACORP INCORPORATED			
	Name* of Registered Agent in Georgia		paracorp@myparacorp.com	
	279 W. Crogan Street		Registered Agent's Email Address	
	Registered Office Street Address in Georgia (post office box or mail drop not acceptable for registered office address)			
	Lawrenceville	Gwinnett County	GA	30046
	City	County	State	Zip Code
6.	Larry Levinson 500 S Sepulveda Blvd, Ste 301	Los Angeles	CA	90049
	Manager's Name* & Address (person with substantial responsibility for managing LLC's business activities)	City	State	Zip Code
7.	500 S Sepulveda Blvd, Ste 301	Los Angeles	CA	90049
	Address Where Limited Liability Company's Records Are Maintained	City	State	Zip Code
8.	Effective Date: (Choose one) ☒ Upon filing ☐ Delayed effective date and/or time: _____			
	(A delayed effective date must be within 90 days of the filing date.)			
9.	NOTICE: Mail the following items to the Secretary of State at the above address			
	(1) This application;			
	(2) Fee of \$235.00 (\$225 filing fee + \$10 paper filing service charge) payable to "Secretary of State." Filing fees are non-refundable.			
	This application is signed by a person duly authorized to sign such instruments by the laws of the jurisdiction under which the foreign limited liability company is organized. The foreign limited liability company undertakes to keep its records at the address shown in #7 above until its registration in Georgia is canceled or withdrawn. The foreign limited liability company, in accordance with Title 14 of the Official Code of Georgia Annotated, appoints the Secretary of State as agent for service of process if no agent has been appointed in Georgia or, if appointed, the agent's authority has been revoked or the agent cannot be found or served by the exercise of reasonable diligence.			
	Signature of Authorized Person		Date	
	Larry Levinson		4-20-2021	
	Print Name*		Manager	
			Title	

* Enter individual's legal name, i.e. first and last name without use of initials or nicknames. Middle names or initials may be included.

FORM CD 241
(Rev 10/2019)