

STATE OF NEVADA

ROSS MILLER
Secretary of State



SCOTT W. ANDERSON
Deputy Secretary
for Commercial Recordings

OFFICE OF THE
SECRETARY OF STATE

Certified Copy

November 6, 2014

Job Number: C20141106-0383
Reference Number:
Expedite:
Through Date:

The undersigned filing officer hereby certifies that the attached copies are true and exact copies of all requested statements and related subsequent documentation filed with the Secretary of State's Office, Commercial Recordings Division listed on the attached report.

Document Number(s)	Description	Number of Pages
20140752014-06	Articles of Organization	1 Pages/1 Copies



Respectfully,

A handwritten signature in black ink, appearing to read "Ross Miller".

ROSS MILLER
Secretary of State

Certified By: Electronic Filing
Certificate Number: C20141106-0383
You may verify this certificate
online at <http://www.nvsos.gov/>

Commercial Recording Division
202 N. Carson Street
Carson City, Nevada 89701-4069
Telephone (775) 684-5708
Fax (775) 684-7138



ROSS MILLER
Secretary of State
204 North Carson Street, Suite 4
Carson City, Nevada 89701-4520
(775) 684-5708
Website: www.nvsos.gov



050104

Articles of Organization Limited-Liability Company

(PURSUANT TO NRS CHAPTER 86)

Filed in the office of Ross Miller Secretary of State State of Nevada	Document Number 20140752014-06 Filing Date and Time 11/06/2014 9:37 AM Entity Number E0562632014-4
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(The

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Name of Limited-Liability Company: (must contain approved limited-liability company wording; see instructions)	SEABASSTIAN CONSULTING, LLC		Check box if a Series Limited- Liability Company <input type="checkbox"/>	Check box if a Restricted Limited- Liability Company <input type="checkbox"/>
2. Registered Agent for Service of Process: (check only one box)	<input checked="" type="checkbox"/> Commercial Registered Agent: NEVADA INCORPORATING COMPANY Name <input type="checkbox"/> Noncommercial Registered Agent (name and address below) <u>OR</u> <input type="checkbox"/> Office or Position with Entity (name and address below) Name of Noncommercial Registered Agent <u>OR</u> Name of Title of Office or Other Position with Entity Street Address City Nevada Zip Code Mailing Address (if different from street address) City Nevada Zip Code			
3. Dissolution Date: (optional)	Latest date upon which the company is to dissolve (if existence is not perpetual):			
4. Management: (required)	Company shall be managed by: <input checked="" type="checkbox"/> Manager(s) <u>OR</u> <input type="checkbox"/> Member(s) (check only one box)			
5. Name and Address of each Manager or Managing Member: (attach additional page if more than 3)	1) MCSE LLC Name 723 S CASINO CENTER BLVD., 2ND FL LAS VEGAS NV 89101-6716 Street Address City State Zip Code 2) Name Street Address City State Zip Code 3) Name Street Address City State Zip Code			
6. Effective Date and Time: (optional)	Effective Date: Effective Time:			
7. Name, Address and Signature of Organizer: (attach additional page if more than 1 organizer)	I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State. ANYA SCHOOLMAN <input checked="" type="checkbox"/> ANYA SCHOOLMAN Name Organizer Signature 723 S CASINO CENTER BLVD., 2ND FL LAS VEGAS NV 89101-6716 Address City State Zip Code			
8. Certificate of Acceptance of Appointment of Registered Agent:	I hereby accept appointment as Registered Agent for the above named Entity. <input checked="" type="checkbox"/> NEVADA INCORPORATING COMPANY Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity 11/6/2014 Date			

This form must be accompanied by appropriate fees.

Nevada Secretary of State NRS 86 LLC Articles
Revised: 7-26-13



ROSS MILLER
Secretary of State
202 North Carson Street
Carson City, Nevada 89701-4201
(775) 684-5708
Website: www.nvsos.gov



180303

Registered Agent Acceptance

(PURSUANT TO NRS 77.310)

This form may be submitted by: a Commercial Registered Agent, Noncommercial Registered Agent or Represented Entity. For more information please visit <http://www.nvsos.gov/index.aspx?page=141>

USE BLACK INK ONLY - DO NOT HIGHLIGHT

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Certificate of Acceptance of Appointment by Registered Agent

In the matter of SEABASSTIAN CONSULTING, LLC

Name of Represented Business Entity

I, NEVADA INCORPORATING COMPANY

am a:

Name of Appointed Registered Agent OR Represented Entity Serving as Own Agent*

(complete only one)

- a) ☒ commercial registered agent listed with the Nevada Secretary of State,
b) ☐ noncommercial registered agent with the following address for service of process:

Street Address City Nevada Zip Code

Mailing Address (if different from street address) City Nevada Zip Code

- c) ☐ represented entity accepting own service of process at the following address:

Title of Office or Position of Person in Represented Entity

Street Address City Nevada Zip Code

Mailing Address (if different from street address) City Nevada Zip Code

and hereby state that on 11/04/2014 I accepted the appointment as registered agent for the above named business entity. Date

X [Signature]
Authorized Signature of R.A. or On Behalf of R.A. Company

11/04/2014
Date

*If changing Registered Agent when reinstating, officer's signature required.

X _____
Signature of Officer

Date

**INITIAL/ANNUAL LIST OF MANAGERS OR MANAGING MEMBERS AND STATE
BUSINESS LICENSE APPLICATION OF:**

SEABASSTIAN CONSULTING, LLC

NAME OF LIMITED-LIABILITY COMPANY

ENTITY NUMBER

E0562632014-4

FOR THE FILING PERIOD OF NOV, 2014 TO NOV, 2015

USE BLACK INK ONLY - DO NOT HIGHLIGHT

****YOU MAY FILE THIS FORM ONLINE AT www.nvsilverflume.gov****


- ☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

IMPORTANT: Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all manager or managing members. A Manager, or if none, a Managing Member of the LLC must sign the form. **FORM WILL BE RETURNED IF UNSIGNED.**
2. If there are additional managers or managing members, attach a list of them to this form.
3. Return completed form with the fee of \$125.00. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is \$200.00. Effective 2/1/2010, \$100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. **Ordering Copies:** If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

ANNUAL LIST FILING FEE: \$125.00 LATE PENALTY: \$75.00 (if filing late)

BUSINESS LICENSE FEE: \$200.00 LATE PENALTY: \$100.00 (if filing late)

Filed in the office of  Ross Miller Secretary of State State of Nevada	Document Number 20140752016-28 Filing Date and Time 11/06/2014 9:37 AM Entity Number E0562632014-4
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(This document was filed electronically.)
ABOVE SPACE IS FOR OFFICE USE ONLY

CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW

- ☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code:

NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

NRS 76.020 Exemption Codes

- 001 - Governmental Entity
005 - Motion Picture Company
006 - NRS 680B.020 Insurance Co.

NAME MCSE LLC	MANAGER OR MANAGING MEMBER		
ADDRESS 723 S CASINO CENTER BLVD., 2ND FL , USA	CITY LAS VEGAS	STATE NV	ZIP CODE 89101-6716
NAME	MANAGER OR MANAGING MEMBER		
ADDRESS	CITY	STATE	ZIP CODE
NAME	MANAGER OR MANAGING MEMBER		
ADDRESS	CITY	STATE	ZIP CODE
NAME	MANAGER OR MANAGING MEMBER		
ADDRESS	CITY	STATE	ZIP CODE

None of the managers or managing members identified in the list of managers and managing members has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of a manager or managing member in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X ANYA SCHOOLMAN

Title

MANAGER

Date

11/6/2014 9:37:42 AM

**Signature of Manager, Managing Member or
Other Authorized Signature**

SECRETARY OF STATE



LIMITED LIABILITY COMPANY CHARTER

I, ROSS MILLER, the Nevada Secretary of State, do hereby certify that **SEABASSTIAN CONSULTING, LLC** did on November 6, 2014, file in this office the Articles of Organization for a Limited Liability Company, that said Articles of Organization are now on file and of record in the office of the Nevada Secretary of State, and further, that said Articles contain all the provisions required by the laws governing Limited Liability Companies in the State of Nevada.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on November 6, 2014.

A handwritten signature in black ink, appearing to read "Ross Miller".

ROSS MILLER
Secretary of State

Certified By: Electronic Filing
Certificate Number: C20141106-0383
You may verify this certificate
online at <http://www.nvsos.gov/>

SECRETARY OF STATE



NEVADA STATE BUSINESS LICENSE

SEABASSTIAN CONSULTING, LLC
Nevada Business Identification # NV20141688881

Expiration Date: November 30, 2015

In accordance with Title 7 of Nevada Revised Statutes, pursuant to proper application duly filed and payment of appropriate prescribed fees, the above named is hereby granted a Nevada State Business License for business activities conducted within the State of Nevada.

Valid until the expiration date listed unless suspended, revoked or cancelled in accordance with the provisions in Nevada Revised Statutes. License is not transferable and is not in lieu of any local business license, permit or registration.



IN WITNESS WHEREOF, I have hereunto
set my hand and affixed the Great Seal of State,
at my office on November 6, 2014

A handwritten signature in black ink, appearing to read "Ross Miller".

ROSS MILLER
Secretary of State

You may verify this license at www.nvsos.gov under the Nevada Business Search.

License must be cancelled on or before its expiration date if business activity ceases.
Failure to do so will result in late fees or penalties which by law cannot be waived.
There is no fee for cancellation.

Corporate Services Group, LLC
723 S. Casino Center Blvd., 2nd Floor
Las Vegas, NV 89101-6716

RECEIPT

TO:
Mr. Ken Silverstein 1826 Lamont Street NW Washington, DC 20010

DATE	FILE NO.
11/6/2014	E0562632014-4

Re: **SEABASSTIAN CONSULTING, LLC**

Payment Mthd.	Check No.
Visa	

DESCRIPTION	QTY	RATE	AMOUNT
Registered Agent Fee (NOV 2014 to NOV 2015)	1	\$100.00	\$100.00
Record Book	1	\$85.00	\$85.00
WE SINCERELY APPRECIATE YOUR BUSINESS!		TOTAL:	\$185.00

STATE OF NEVADA

ROSS MILLER
Secretary of State

SCOTT W. ANDERSON
Deputy Secretary
for Commercial Recordings



OFFICE OF THE
SECRETARY OF STATE

Commercial Recordings Division
202 N. Carson Street
Carson City, NV 89701-4069
Telephone (775) 684-5708
Fax (775) 684-7138

MERCEDES L. HILBRECHT
CORPORATE SERVICES GROUP, LLC
723 S CASINO CENTER BLVD., 2ND FL
LAS VEGAS, NV 89101-6716

Job: C20141106-0383
November 6, 2014

Special Handling Instructions:

Charges

Description	Document Number	Filing Date/Time	Qty	Price	Amount
Articles of Organization	20140752014-06	11/6/2014 9:37:31 AM	1	\$75.00	\$75.00
Copies - Certification of Document	20140752014-06	11/6/2014 9:37:31 AM	1	\$30.00	\$30.00
Initial List	20140752016-28	11/6/2014 9:37:54 AM	1	\$125.00	\$125.00
Business License 11/2014-11/2015	20140752016-28	11/6/2014 9:37:54 AM	1	\$200.00	\$200.00
Total					\$430.00

Payments

Type	Description	Amount
Credit	02479C 14110646832190	\$430.00
Total		\$430.00

Credit Balance: \$0.00

Job Contents:

Certified File Stamped Copy(s): 1
LLC Charter(s): 1
File Stamped Copy(s): 1
Business License(s): 1

MERCEDES L. HILBRECHT
CORPORATE SERVICES GROUP, LLC
723 S CASINO CENTER BLVD., 2ND FL
LAS VEGAS, NV 89101-6716