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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. ACME-WILEY ACQUISITION CORP.	•
(Name of corporation: must include the word "INCORPORATED", "C words or abbreviations of like import in language as will clearly indic of a natural person or partnership if not so contained in the name at	nto that is in a communication incomed
2ILLINOIS	3. applied for
(State or country under the law of which it is incorporated)	(i ci ildilibal) ii abbusabiat
4. 11/8/96 5. PERPETUAL (Date of incorporation) 6. (Duration: Year corp. will cea	
(Date of Incorporation) (Duration: Year corp. will cea	se to exist or "perpetual")
6. Upon Qualification (Date first transacted business in Florida. (See sections 607.1501, (
(Date first transacted business in Florida. (See sections 607.1501, (807.1502 and 817.156, F.S.))
7. <u>c/o Stonebridge Partners</u> 50 Main Street	
White Plains, NY 10606	
(Current mailing address)	
8. Preduction + Sales of Signs	
8. Production + Sales of Signs. (Purpose(s) of corporation authorized in home state or country to be Florida)	carried out in the state of
9. Name and street address of Florida registered agent:	
Name: <u>C T CORPORATION SYSTEM</u>	96 S IAIG
Office Address: <u>c/o C T Corporation System, 1200</u>	South Pine Island Road
<u>Plantation</u> , Florida, <u>33</u>	324 9 27
(Zip	Code)
O. Registered agent acceptance:	STATE RATION 1:32
laving been named as registered agent and to accept service of orporation at the place designated in this application. I herebegistered agent and agree to act in this capacity. I further agree to ll statutes relative to the proper and complete performance of my no accept the obligations of my position as registered agent.	process for the above stated y accept the appointment as Comply with the provisions of
C T CORPORATION SYSTEM	

(Registered agent's signature) (Officer)

(Type Name and Title of Officer)

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- 11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.
- 12. Names and addresses of officers and/or directors:

A. D	11161	-10	JNS

Chairman: <u>Michael Bruno</u>
Address: 50 Main Street
White Plains, NY 10606
Vice Chairman: Scott Rodman
Address:50 Main Street
White Plains, NY 10606
Director: David Zackrison
Address: 50 Main Street
White Plains, NY 10606
Director: Harrison Wilson
Address: <u>50 Main Street</u>
B. OFFICERS
B. OFFICERS President: Michael Bruno
B. OFFICERS President: Michael Bruno Address: C/O Stonebridge Partners
B. OFFICERS President: Michael Bruno Address: C/O Stonebridge Partners
B. OFFICERS President: Michael Bruno Address: C/O Stonebridge Partners 50 Main Street White Plains, NY 10606 Vice President: Scott Rodman
B. OFFICERS President: Michael Bruno Address: C/O Stonebridge Partners 50 Main Street White Plains, NY 10606 Vice President: Scott Rodman
B. OFFICERS President: Michael Bruno Address: C/O Stonebridge Partners 50 Main Street White Plains, NY 10606 Vice President: Scott Rodman
B. OFFICERS President: Michael Bruno Address: C/o Stonebridge Partners 50 Main Street White Plains, NY 10606 Vice President: Scott Rodman C/o Stonebridge Partners Address: 50 Main Street White Plains, NY 10606 Secretary: Harrison Wilson
B. OFFICERS President: Michael Bruno Address: C/o Stonebridge Partners 50 Main Street White Plains, NY 10606 Vice President: Scott Rodman C/o Stonebridge Partners Address: 50 Main Street White Plains, NY 10606

•	Troasurer:
•	Address:
NOTE: If nece	essary, you may attach an addendum to the application listing additional officers
13. Signatura o	Medis & Brand
14	Chairman, Vice Chairman, or any officer listed in number 12 of the application) PRESIDENT - Michael S. Brund, JR. inted name and capacity of person signing application)

File Humber 5911-270-1



I, George H. Ryan. Secretary of State of the State of Illinois,



In Cestin	nonų Mhereof,	I herclo	sel
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my hund and cause to be affixed the Great Seal of the State of Illinois this _____

day of NOVEMBER A.D., 19 96

George H Ryan
SECRETARY OF STATE