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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : M. BURR KEIM COMPANY

Account Number : I19990000242 Phone : (215)563-8113 Fax Number : (215)977-9386 08 JUL 29 AM 8: 51.
SECKETARY OF STATE
ANASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

RECEIVED

3 JUL 29 PM 3: 20
SECKELAN OF STATE

354 MEDIA LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

D. BRUCE

JUL 3 0 2008

EXAMINER

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

3:	84 MEDIA LLC	
(Must end with the words "	Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address	ss of the principal office of the Limited Lie	ability Company is:
Principal Office Address:	Mailing Address:	
101 Plantation Circle	101 Plantation Circle	
Ponte Vedra, FL 32080		
	Ponte Vedra, FL 32080	
ARTICLE III - Registered Agent, I (The Limited Liability Company cannot serve as business entity with an active Florida registration	Registered Office, & Registered Agent's lts own Registered Agent. You must designate an indivi-	dual or another of
ARTICLE III - Registered Agent, I (The Limited Liability Company cannot serve as business entity with an active Florida registration.) The name and the Florida street addresses.	Registered Office, & Registered Agent's lts own Registered Agent. You must designate an indivi- n.) ess of the registered agent are:	Signature: 08 JUL 29
ARTICLE III - Registered Agent, I (The Limited Liability Company cannot serve as business entity with an active Florida registration.) The name and the Florida street addresses.	Registered Office, & Registered Agent's lts own Registered Agent. You must designate an indivi-	dual Mothers JUL 29
ARTICLE III - Registered Agent, I (The Limited Liability Company cannot serve as business entity with an active Florida registratio The name and the Florida street address	Registered Office, & Registered Agent's Its own Registered Agent. You must designate an indivi- ess of the registered agent are: Justin J. Dennis	JUL 29 AM
ARTICLE III - Registered Agent, I (The Limited Liability Company cannot serve as business entity with an active Florida registratio The name and the Florida street address	Registered Office, & Registered Agent's Its own Registered Agent. You must designate an individual.) case of the registered agent are: Justin J. Dennis Name	JUL 29 MM

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 as provided for in Chapter 608, F.S..

Bogiphité Agait i Stynen (ESQUERED)

(CONTINUED)
Page 1 of 2

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Typed or printed name of signee	<u>Title:</u> "MGR" = Manager "MGRM" = Managir	Name and Address: ng Member	
(Use attachment if necessary) TICLE V: Effective date, if other than the date of filing:	MGRM	Justin J. Dennis	
(Use attachment if necessary) TCLE V: Effective date, if other than the date of filing:			
ICLE V: Effective date, if other than the date of filing:		Ponte Vedra, FL 32080	
ICLE V: Effective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be more than five business days properties of the date of filing.) REQUIRED SIGNATURE: (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Justin J. Dennis, Authorized Person Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent			
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