1970000007

ACCOUNT NO.

072100000032

REFERENCE

AUTHORIZATION

COST LIMIT : \$.87.50

ORDER DATE :

CORPORATION

November 6, 1997 \$285.00

ORDER TIME :

9:57 AM

400002342474--6

ORDER NO. : 591777-005

CUSTOMER NO: 4805310

CUSTOMER:

Jonathan Levi, Legal Asst

Dickstein Shapiro Morin &

2101 L Street, N.w.

8th Floor

Washington, DC 20037

FOREIGN FILINGS

NAME:

ACME TELEVISION LICENSES OF

TENNESSEE, L.L.C.

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Glisar

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	_ACME_Television_Licens	es of Tennesse	e, L.L.C.	_	THOS. T.	
"].	ACME Television Licens (Name of foreign limited liability con .C." if not so contained in the name a	mpany must end with a present. Please note	the words "limited company" ("IIC." is not an acceptable	or their abb suffix in F	reviation lorida.)	<u>4</u> 1
2.		3	62-1705160		200	
	(Jurisdiction under the law of which company is organized)	foreign limited liabilit	y (FEI number, if a	pplicable)		-
4.	Tennessee	5	perpetual			
	(Date of Organiza	tion)	(Duration: Year limited lie cease to exist or "perpetual"	ability comp	onny will	-
6.	upon qualification					
	(Date first transacted	business in Florida. (S	ee sections 608.501, 608.502,	and 817.15	is Es)	-
7.	650 Town Center					
	Costa Mesa, CA				- at at	
		(Street address of pr	incipal office)			
. L	ist name, title, and business as manage the foreign limited liabi	ddress of each ma lity company in Flo	naging member[MGRM] orida (attach additional p	or manag age if noc	gcr[MGR]who essary)	
i, L	ist name, title, and business ac manage the foreign limited liabi	ddress of each maility company in Flo	naging member[MGRM] orida (attach additional p NAME & ADDRESS	age if noc	ger[MGR]who essary) TITLE:	
. L vill r	ramigo the totolga minted maor	TITLE:	orida, (attach additional b	age if noc	essary)	
. L	NAME & ADDRESS:	TITLE:	orida, (attach additional b	age if noc	essary)	· · · ·
. L	NAME & ADDRESS:	TITLE:	orida, (attach additional b	age if noc	essary)	· · · ·
. L	NAME & ADDRESS:	TITLE:	orida, (attach additional b	age if noc	essary)	
. L	NAME & ADDRESS:	TITLE:	orida, (attach additional b	age if noc	essary)	
. L	NAME & ADDRESS:	TITLE:	orida, (attach additional b	age if noc	essary)	
s. L	NAME & ADDRESS:	TITLE:	orida, (attach additional b	age if noc	essary)	

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of
ACME Television Licenses of Tennessee, L.L.C. deposes and says:
the above named limited liability company has at least two members
2) the total amount of cash contributed by the member(s) is \$ 1000.00
3) if any, the agreed value of property other than cash contributed by member(s) is \$\frac{\text{N/A}}{\text{N/A}}\$. A description of the property is attached and made a part hereto.
4) the total amount of cash or property anticipated to be contributed by member(s) is $\frac{1000.00}{}$. This total includes amounts from 2 and 3 above.
ACME Television Holdings of Tennessee, L.L.C., Member By: Douglas Gealy, President
Signature of a member or authorized representative of a member. (In accordance with section 608 408(3), Florida Statutes, the execution of this effidavit

constitutes an affirmation under the penalties of perjury that the facts stated herein are true)

		Title	Address
Jamie Kellner	MOR	Chairman and Chief Executive Officer	Warner Bros. Networks 4000 Warner Boulevard Building 34R, Room 180 Burbank, CA 91522
Douglas Gealy	MOR	President and Chief Operating Officer	ACME Television Holdings, L.L.C. 890 Bluespring Lane Frontenac, MO 63131
Thomas Allen	MCR	Executive Vice President and Chief Financial Officer	ACME Television Holdings, L.L.C. 650 Town Center Drive Suite 850 Costa Mesa, CA 92626

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

i. The name of the li	nited liability con	pany is:		
ACIÆ Televisio	n Licenses of T	Cennessee, L.L.C.		
2. The name and add	ress of the regist	ered agent and office	is;	97 NOV 10 SECRETAR TALLAHASS
	Corporat	ion Service Compar	nv	SEL P
		(Name)		PH 1: 28 PH STATE SEE FLORID
	1201 Hay	s Street		器 2
	(P.C	. Box not acceptable)		豆豆 0
	Tallahas	see, FL 32301 (City/State/Zip)		
Having been named as limited liability compan ment as registered age provisions of all statute am familiar with and ac	y at the place det ant and agree to a as relating to the i	signated in this certific act in this capacity. The proper and complete	cate, I hereby acc further agree to c	comply with the
By: Patricia	ments.			-97
	, Julia (GLE)		(Date)	

Secretary of State
Corporations Section
James K. Polk Building, Suite 1800
Nashville, Tennessee 37243-0306

ISSUANCE DATE: 11/07/1997 REQUEST NUMBER: 97311106 TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 04/17/1997 STATUS: ACTIVE CORPORATE EXPIRATION DATE: PERPETUAL CONTROL NUMBER: 0329078 JURISDICTION: TENNESSEE

TO: SEARCH IS ON P.O. BOX 120598 REQUESTED BY: SEARCH IS ON P.O. BOX 120598

NASHVILLE, TN 37212

NASHVILLE, TN 37212

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT

"ACME TELEVISION LICENSES OF TENNESSEE, L.L.C."

A LIMITED LIABILITY COMPANY DULY FORMED UNDER THE LAW OF THIS STATE WITH DATE OF FORMATION AND DURATION AS GIVEN ABOVE;
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE EXISTENCE OF THE LIMITED LIABILITY COMPANY HAVE BEEN PAID:
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF THE EXISTENCE HAVE NOT BEEN FILED.

97 NOV 10 PM 1: 28
SECRETARS SEE FLORIDA

FOR: REQUEST FOR CERTIFICATE

FROM: TSIO (BOX 120598) P. O. BOX 120598

NASHVILLE, TN 37212-0000

ON DATE: 11/07/97

FEES \$110.00

\$100.00

TOTAL PAYMENT RECEIVED:

RECEIVED:

\$210.00

RECEIPT NUMBER: 00002203676 ACCOUNT NUMBER: 00000499



RILEY C. DARNELL SECRETARY OF STATE