TOTAL P.02

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 DEC -8 AM 11:41

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

700025266097
12/08/03--01003--039 **150.00

DOCUMENT # M99000000497

1. Limited Liability Company's Name

MP Marketing of Florida LLC

2. Principal Office Address		**3.** Mailing Office Address	
1995 Broadway		1995 Broadway	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
3rd Floor		3rd Floor	
City & State		City & State	
New York, N.Y.		New York, N.Y.	
Zip	Country	Zip	Country
10023	USA	10023	USA

4. State/Country of Formation: Delaware

5. Date Organized or Qualified To Do Business in Florida: 4/2/99

6. FEI Number: 22-3643143 ☐ Applied For ☐ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐ $5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name: CT Corporation System

Street Address (P.O. Box Number is Not Acceptable): 1200 South Pine Island Road

Suite, Apt. #, Etc.:

City: Plantation | State: FL | Zip Code: 33324

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent: Sheila Clark — SHEILA CLARK — Date: 12-4-03
REGISTERED AGENT MUST SIGN — Assistant Secretary

CR2E041 (10/02)

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	Millennium Partners Management LLC	1995 Broadway	New York, N.Y. 10023

REINSTATEMENT 03

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Managing Member/Manager: _____ Date: _____ Daytime Phone #: _____

Typed or printed name of signing Managing Member/Manager: Steven Hoffman

Paul, Hastings, Janofsky & Walker LLP
75 East 55th Street, New York, New York 10022-3205
telephone 212-318-6000 / facsimile 212-319-4090 / internet www.paulhastings.com

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December 4, 2003 42241.00001

VIA UPS

Division of Corporations
Registration Section
409 E. Gaines St.
Tallahassee, FL 32399

Re: Reinstatement

To whom it may concern:

Please file the enclosed Reinstatement form for MP Marketing of Florida LLC and return proof of filing to me at your earliest convenience. Thank you.

Very truly yours,

D Goldman

Deborah Goldman
Paralegal

Enclosure