

**2016 FOREIGN PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F13000003275

**Entity Name:** COLLECTIVE MEDIA, INC.

**Current Principal Place of Business:**

250 HUDSON STREET  
4TH FLOOR  
NEW YORK, NY 10013

**FILED**  
**Oct 24, 2016**  
**Secretary of State**  
**CR4237815187**

**Current Mailing Address:**

250 HUDSON STREET  
4TH FLOOR  
NEW YORK, NY 10013 US

**FEI Number:** 20-5762024

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** IAN CONNETT

10/24/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CEO  
Name APPRENDI, JOSEPH  
Address 250 HUDSON STREET  
4TH FLOOR  
City-State-Zip: NEW YORK NY 10013

Title PRESIDENT AND CHIEF OPERATING  
OFFICER  
Name BIANCHI, KERRY  
Address 250 HUDSON STREET  
4TH FLOOR  
City-State-Zip: NEW YORK NY 10013

Title DIRECTOR  
Name APPRENDI, JOSEPH  
Address 250 HUDSON STREET  
4TH FLOOR  
City-State-Zip: NEW YORK NY 10013

Title DIRECTOR  
Name CARRIGAN, ROBERT  
Address 250 HUDSON STREET  
4TH FLOOR  
City-State-Zip: NEW YORK NY 10013

Title DIRECTOR  
Name GANDHI, SAMEER  
Address 250 HUDSON STREET  
4TH FLOOR  
City-State-Zip: NEW YORK NY 10013

Title DIRECTOR  
Name JOHNSTON, NEIL  
Address 250 HUDSON STREET  
4TH FLOOR  
City-State-Zip: NEW YORK NY 10013

Title DIRECTOR  
Name JUDGE, GEOFF  
Address 250 HUDSON STREET  
4TH FLOOR  
City-State-Zip: NEW YORK NY 10013

Title DIRECTOR  
Name SCHWARTZ, HAGI  
Address 229 W. 43RD ST.  
8TH FLOOR  
City-State-Zip: NEW YORK NY 10036

**Continues on page 2**

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** IAN CONNETT

**DIRECTOR, LEGAL**

10/24/2016

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name SIGALOW, IAN  
Address 250 HUDSON STREET  
4TH FLOOR  
City-State-Zip: NEW YORK NY 10013

Title CFO  
Name WOLFSON, ARIN  
Address 250 HUDSON STREET  
4TH FLOOR  
City-State-Zip: NEW YORK NY 10013

Title CHIEF TECHNOLOGY OFFICER  
Name VANDERMAY, JOHN  
Address 250 HUDSON STREET  
4TH FLOOR  
City-State-Zip: NEW YORK NY 10013

Title DIRECTOR  
Name YOUNG, CHRISTOPHER  
Address 250 HUDSON STREET  
4TH FLOOR  
City-State-Zip: NEW YORK NY 10013

Title SVP, PEOPLE  
Name PERGAMENT, SHANA  
Address 250 HUDSON STREET  
4TH FLOOR  
City-State-Zip: NEW YORK NY 10013

Title DIRECTOR, LEGAL  
Name CONNETT, IAN  
Address 250 HUDSON STREET  
4TH FLOOR  
City-State-Zip: NEW YORK NY 10013