FILED Apr 21, 2003 8:00 am Secretary of State FOR PROFIT CORPORATION LINIFORM RUSINESS DEPORT (LIRP)

DOCU 1. Entity Nam	MENT # 834689 Com Dutdoor Group In	04-21-2003 90400 046 ***150.00					
	DO NOT WRITE IN THIS SP						
Suite, Apt.	f, etc.	<u></u>	DO NOT WRITE IN THIS SPACE				
City & Stat		ountry		Applied For Not Applicable 8.75 Additional Required			
	DO NOT WRITE IN THIS SPACE	Name Corpo	7. Name and Address of Current Registered A	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
City_Tallangsec FL Zip Code 32301 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating) 9. This corporation is elligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back) Amended UBR is \$61.25 Make Check Payable to Department of State							
11.: ITTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECTORS DIRIVPITE Robert & Freedline 1515 Broadway New York, WY 10036 DIRIEVPISE MICHAEL D. FRICKIAS 1515 Broadway New York, NY 10036 DIRIVP SMSAN C. Gordon 1515 Broadway New York, NY 10036 The York, NY 10036 Freedly Sisbeyadary New York, NY 10036 PR Wally C. Kelly 2509 North Black Canyon Haghway Property that the information supplied with this filing does not qualify for the contribution of the supplemental report is true and accurate and that my Property that the information supplied with this filing does not qualify for the contribution of the contribution	TITLE NAME STREET ADDRESS CITY: ST-2P LITLE NAME STREET ADDRESS CITY: ST-7P TITLE NAME STREET ADDRESS CITY: ST-7P	DO NOT WRIT IN THIS SPAC	that the information			

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 in Block 11 or on an attachment with an address, with all other like empowered.

SI	GI	N	ATI	IR	E.

JULY ALL SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jane R. Fuerst, Assistant Secretary 212-258-6847 04/1/03