## FOODDODDODS8

CORPORATION(S) NAME		Ac e
MJI Broadcasting, Inc.		DEC
		ASS.
		FIG P III
		105 -
		TOTE 9
	***************************************	<del></del>
		<del> </del>
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•		8000047347886
() Profit 2 VILLAGO	() Amendment	-12/20/0101053022 *****35.00 *****35.00 () Merger
() Foreign a co	() Dissolution/Withdrawal	() Mark
	() Reinstatement	
() Limited Partnership	() Annual Report	() Other
() TTCFT BY THE STORY OF THE ST	() Name Registration	Change of RA
	() Fictitious Name	() UCC
() Certified Copy	() Photocopies	() CUS
() Call When Ready	() Call If Problem	() After 4:30
(x) Walk In	() Will Wait	(x) Pick Up
() Mail Out	.,	
Name	12/20/01	Order#: 4571802
Availability Document	March 110	
Examiner	experience mes	Ref#:
Updater	ROACHORD MS	
Verifier	13	
W.P. Verifier	bas	Amounts &

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

## Florida Department of State, Sandra B. Mortham, Secretary of State

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0 undersigned corporation organized under th	502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the	
submits the following statement in order to constate of Florida.	hange its registered office or registered agent, or both, in the	
1. The name of the corporation is: MJI BROAD	DCASTING, INC.	
•		
2. The mailing address of the corporation is:_	135 WEST 50TH STREET, NEW YORK, NY 10020	
3. Date of incorporation/qualification: JAN. 4	, 2000 Document number: <u>F00000000058</u>	
4. The name and address of the current register		
CORPORATION SERVICE CON	MPANY Property 2	
1201 HAYS STREET	DEC 20	
TALLAHASSEE, FL 32301-2525		
5. The name and address of the new registered	agent and office; (P. O. Box Not Acceptable)	
C T Corporation System	<u> ကြို့ကို လူ ဦ</u>	
c/o C T Corporation System, 120	0 South Pine Island Road	
	Om V	
	I the street address of the business office of its registered	
	uly adopted by its board of directors or by an officer so	
I WI I		
(Signature of an officer, chairman or vice cl	hairman of the board) (Date)	
KIRK HOOD Secretary	12/18/01	
(Printed or typed name and	1 title) (Date)	
	to accept service of process for the above stated at as registered agent and agree to act in this capacity. If all statutes relative to the proper and complete with and accept the obligation of my position as	
MINI	12/18/01	
(Signature of Registered Agent)  If signing on behalf of an entity:  KIR  ASS	K HOOD SISTANT SECRETARY	
(Typed or Printed Name)	(Capacity)	
CR2E045(4/95)	THE TALL TOWN, THE AR	

FILING FEE: \$35.00