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OB JUN 26 AM II: 38
ALLAHASSEE. FLORIDA TO: **New Filing Section Division of Corporations** SUBJECT: Black Dog Media,Inc. (Name of corporation - must include suffix) Dear Sir or Madam: The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida. Please return all correspondence concerning this matter to the following: Paul Ducharme (Name of Person) Black Dog Media, Inc. (Firm/Company) 25 Route 31 S., Suite C, PMB 2024 (Address) Pennington, NJ 08534 (City/State and Zip code) For further information concerning this matter, please call: Paul Ducharme (Name of Person) (Area Code & Daytime Telephone Number) STREET/COURIER ADDRESS: **MAILING ADDRESS: New Filing Section New Filing Section Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301 Enclosed is a check for the following amount: \$70.00 Filing Fee **▼** \$78.75 Filing Fee & \$78.75 Filing Fee & \$87.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Black Dog	g Media, Inc.			
	corporation; must include "INCORPORAT Corp," "Inc," "Co," or "Corp.")	ED,	" "COMPANY," "CORPORATION,"	
(If name unavail	able in Florida, enter alternate corporate na	ıme	adopted for the purpose of transacting business in Florida)	
Delaware		3.	41-210-8252	
(State or country	under the law of which it is incorporated)		(FEI number, if applicable)	
4. August 27	⁷ , 2003	5.	Perpetual	
· · · · · · · · · · · · · · · · · · ·	of incorporation)	٠.	(Duration: Year corp. will cease to exist or "perpetual")	
6.				
·			n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
_{7.} 25 Route 3	31 S., Suite C, PMB 2024,		• • • • • • • • • • • • • • • • • • • •	
	(Principal office	add	ress)	
25 Route 3	31 S., Suite C, PMB 2024,	P	ennington, NJ 08534	
	(Current mailing	add	ress)	
Media Sal	es		TAL SEI	
(Purpose(s	s) of corporation authorized in home state of)F CC	ountry to be carried out in state of Florida)	
9. Name and stree	et address of Florida registered agent: (P.C	ountry to be carried out in state of Florida) A Box NOT acceptable)	
Name:	Agents & Corporations, Ir	ıc.		
Office Address:	300 Fifth Avenue South,	St	ite 101-330 EFF STATE 38	
	Naples		, Florida 34102	
	(City)		(Zip code)	
IO Damiatamad as				

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature) John L. Williams, Vice Pres.

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:	~
A: DIRECTORS	FILED
Chairman:	08 JUN 26
Address:	OB JUN 26 AM II: 38 TALLAHASSEE, FLORIDA
Vice Chairman:	LORIDA
Address:	
Director:	
Address:	
Director:	
Address:	,,, , , , , , , , , , , , , , , , , ,
B. OFFICERS President: Paul Ducharme	
Address: 25 Route 31 South, Suite C, PMB 2024	
Pennington, NJ 08534	
Vice President: Stacy Ducharme	
Address: 25 Route 31 South, Suite C, PMB 2024	
Pennington, NJ 08534	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendam to the application listing	additional officers and/or directors.
(Signature of Director or Officer listed in number 12 o	,
(Typed or printed name and capacity of person signi	ng application)

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BLACK DOG MEDIA, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF JUNE, A.D. 2008.



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You may verify this certificate online at corp.delaware.gov/authver.shtml

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6682893

DATE: 06-24-08