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CR2E031 (1-89)

W.P. Verlier

CONSENT TO USE OF NAME

Whitehead Media, Inc. and its President, Eddie L. Whitehead consent to the use of the corporate name Whitehead Media of Florida, Inc. Eddie L. Whitehead is the 100% owner of both Whitehead Media, Inc. and Whitehead Media of Florida, Inc.

WHITEHEAD MEDIA, INC.

December 13, 1995

Eddie L Whitehead as its President

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION 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:

			+		
(Whitehead Media of (Name of corporation; must abbreviations of like import or partnership if not so cont	t include the word "If in language as will o	clearly indicate that it i	OMPANY", "CORPORATIO s a corporation instead of a	N", or words or natural person
•	or permoramp in that so conti	Annos III the Hellie e	r fueseur.)	•	
		•			
2.	Delaware			3; applied fo	r
((State or country under the	law of which it is inc	crporated)	(FEI number,	if applicable)
4	December 13, 1995	5	. Perpetual		_
",	(Date of incorporation)			er corp. will cease to exist o	"All matter)
	,	,	(55,51,51,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7	carb: will coped to dyist o	
_					(C) ≥ (C)
6.	Upon Qualification	and Finding (San			5 787 C
Ų	(Date first transacted busine	ass in Florida. (See s	sections 607.1501, 607	7.1502, and 817.156, F.S.))	
7 . 1	12144 Classic Drive	. Coral Springe	. Florida 33071		STATE STATION 1: 34
•		- Seattle Seattle	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
			<u>-</u> -		.
	(C	urrent mailing address	SS)		
8.	broadcast media				
Ŭ.	(Purpose(s) of corporation a	uthorized in home st	ate or country to be ca	rried out in the state of	
Ì	Florida)				
9. 1	Name and street address	of Florida registe	red agent:		
	Name: c m	Corporation Sys			
	Office Address: C/O	d Road	System, 1200 Sou	ith Pine	
			si Tillia o sino	•	A Section 1
	<u>Plant</u>	tation,	Florida, 33324	 	
			(Zip Co	de)	
10	. Registered agent accep	dance.			
Hav	ving been named as register	red agent and to acc	ent service of nmoess	for the above stated corner	etion at the alace
desi	signated in this application.	I hereby accept the a	appointment as registe	red agent and agree to act	in this canacity. I
furth	ther agree to comply with the	e provisions of all sta	atutes relative to the p	roper and complete perform	ance of my duties.
and	d I am familiar with and acce	apt the obligation of a	my position as register	red agent.	, , , , , , , , , , , , , , , , , , , ,
		G T COMP	ration System		
	(4)	VOP L VI)),		
	\mathcal{O}	V + XX			
		(Registered a	gent's signature) (Offic	xer)	
	By: U	nnkles F. S	HAMPANG ne and Title of Officer)	ASST. SEC.	
(FL	- 2189 - 11/16/94)	(Type Nan	ne and Title of Officer)		

- 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 addresses of officers and/or directors:

DIRECTORS

	Chairman	Eddie L. Whitehead
		12144 Classic Drive
		Coral Springs, Florida 33071
	Vice Chair	man:
	Address:_	
	_	-
	Director:_	
	Director:	
B. OI	- FFICERS	
	President:	Eddie L. Whitehead
	· ·	12144 Classic Drive
		Coral Springs, Florida 33071
	Vice Presid	dent:
	Secretary:	
		Lynn S. Whitehead
		12144 Classic Drive Coral Springs, Florida 33071

Treasurer:)			1		
Address:					N. H.	
NOTE: If necessary, ye and/or directors.	ou may at	ttach an addendur.	to the applicati	on listing	addition	al officers
and/or directors.	M	•			d .	
13. Standards Chairm		Chairman		, '		
(Signature of Chairm application)	air, vice t	Chamman, or any c	micer iisted in ni	ımber 12	of the	
14. Eddie L. Whitehead			 			
(Typed or printed nar	me and c	apacity of person s	ianina applicatio	n)		

State of Delaware Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WHITEHEAD MEDIA OF FLORIDA, 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 THIRTEENTH DAY OF DECEMBER, A.D. 1995.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

SECRETARY OF STATE
OVISION OF CORPORATIONS
SECRETARY OF STATE
OF S



Edward J. Freel, Secretary of State

AUTHENTICATION:

2571035 8300

DATE:

7748329

950292053

12-13-95

	PLEAS	SE READ	ALL INS	TRUCTION	S BEFORE	COMPLE.	TING THIS FORM	September 2
REIN	PLICATION FOR NSTATEMENT		FLORIC	DA DEPARTME Sandra B. Mo Secretary of DIVISION OF CORPO	ENT OF STATE ortham I State		AFPROVEL AND FILED 96 OCT -7 PH)
DOCUMENT # F9500006137				1				
	TEHEAD MEDIA	OF FLOR	IDA, IN	C.			SECRETARY OF ST TALLANASSEE, FLO	IATE DRIDA
Principal I	Place of Business		Mailing Add:	d:osa				
-000ML-	1LABBIG-BRIVE GFRINGO-FL-400FI		-00WF-01 -18141-079	1000-01-000				
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2. Now Pri	addresses are incorrect in an trincipal Office Address, If App	pplicable	3. New Malli	Illing Office Address, If	or correction below.	4. Date Incom	porated or Qualified	
Suite, Apt.	. #, etc.		Sulla, Apl. #,	#, etc.	עם	~ <u>. </u>	or 52-1958946	12/15/1995 Applied For
ZIP	A BEACH GARDE		City & State PALM Zip	BEACH COUNTY		6.	-APPLIED FOR-	Not Applicable
334	A10 Paus Street Addresses of Each	ach Officer and/or	_334	lorida nonprofit corpora	Prations must list at least	nast 3 directors)	TE OF STATUS DESIRED	
Title(#) 1	Name e and/or	o of Officers or Directors		Str	Street Address of Each Officer and/or Director Use Post Office Box N	h	4 City / Sta	41. 14.
PC	WHITEHEAD, EDDIE (i.		-12144-GLAGGE	BLUD, SU		COM STRICE IL	1884- 1884 - F. 1884
s	WHITEHEAD, LYNN S	\$		-12141-CLAGGE	BLUD, SU		-CORNL GERMAGO FL as	10074-
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	6. Name and Address		gistered Ager	int	Name De	ry love	Address of New Registered Ad	-10-7-ch
1200	CORPORATION SYSTEM SOUTH PINE ISLAND RO			ı	Clo Gree Street Address (P.	Chberg O. Box Number is	Is Not Acceptable)	F000 (7%
	ITATION FL 33324	3.		- !	Suite, Apt. #, Lic.	1500	Olas Boulevand	1.5 s.c. vo e.g. 8
10. I, being	appointed the rogistared ago	nest of the above	named coyor		City	1 1	State FL	Zip Code 3330
ture of	, (<u>5</u> .1(() (A))//	ENT MUST SIGN	A and accept	igations or soc	Date 101196	
11. Dor De	es this corporation pt. of Revenue u	ion nav anv	v intanci	ible toy to the	ne utes. Yes		(See uther side on intangi	B for information gible tax.)
12. I certify to this reins	that I am an officer or director statement application: the rea	tor or the receiver of eason for dissolution	or trustee emp	npowered to execute the eliminated, the corpor	this application as pro orate name satisfies th	rovided for in chapt the requirements of	ptor 607 or 617, F.S. I further oc of section 607.0401 or 617.040 fer section 119.07(3)(i), F.S. Th	entity that when filing 11, F.S., that all fees the Information Indicated
SIGNATI	URE.®		DO:	AGNING OFFICER ON I	DIRECTOR		Date Days	SA 3A 3A