# F. 98000000376

CT Corporation System lequestor's Name 660 East Jefferson Stre			
ddress Tallahassee, FL 32301	222-1092		
City State Zip	Phone		
CORPORAT	TON(S) NAME	900002408. -01/22/980 ****122.50	<b>469</b> 104300 -****122
Trilogy Media E	mup/nc.		- -
<u>, 7</u>	\		_ M
Profit ) NonProfit	() Amendment	() Merger JAN	SECRE
<b></b> Foreign	( ) Dissolution/Withdr	awal () Mark 🔀	
) Limited Partnership ) Reinstatement ) Fictitious Name	() Annual Report () Name Registratio	() Other () Change of R:A. () UCC Filing	O OF STATE RPORATION
Certified Copy	() Photo Copies	() CUS	- ਲ
) Call When Ready ) Walk In ) Mail Out	() Call if Problem () Will Wait	() After 4:30 () Pick Up	
	Please Return Extra Copies File Stamped. Thank You!!!	SUSION OF CCRPORATION	
/erifier	Clope.	NO TO	
Acknowledgment			

## 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.	Trilogy Media Group, Inc.				
	(Name of corporation: must include the word " abbreviations of like import in language as will clearly if not so contained in the name at present.)	'INCORPORATED", "COMPANY", "CORPOR y indicate that it is a corporation instead of a nature	ATION* of	or words or partnership	
2.	Delaware	3. <u>65-0803325</u> (FEI number, if applicable)			
	(State or country under the law of which it is incorporated)				
4.	December 31, 1997	5. Perpetual			
	(Date of incorporation)	(Duration: Year corp	. will ceas	e to exist or	
۲.	Not applicable	"perpetual")	98	N SE	
Ų,		es in Florida (SEE SECTIONS 607.1501,	=======================================	<del>- 22</del>	
	607.1502,	. AND 617.155, F.S.)	N 22	FIAR PAR PR	
7.	12800 University Drive, Suite 650		739	22°CD	
	Fort Myers, Florida 33907			ORATION OF THE PROPERTY OF THE	
	(Currey	nt mailing address)		S	
8.	For the transaction of any and all lawful busine	ess within the state of Florida			
	(Purpose(s) of corporation	n authorized in home state or country out in the state of Florida)			
9.	Name and street address of Florida registere (P.O. Box or Mail Drop Box NOT acceptable)	ed agent:			
	Name: C.T. Corporation System				
	Office Address: 1200 South Pine Island Ro	oad			
		ida 33324			
	, =	(Zip Code)			
lΩ,	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)

CONNIE BRYAN SPECIAL ASSISTANT SECRETARY

NO.343 P.10/12

JAN.21.1998 6713AM

- 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:
  (Street address ONLY P.O. Box NOT acceptable)

A.	DIRECTORS	(Street Address	only -	P.O. Box	NOT	acceptable)
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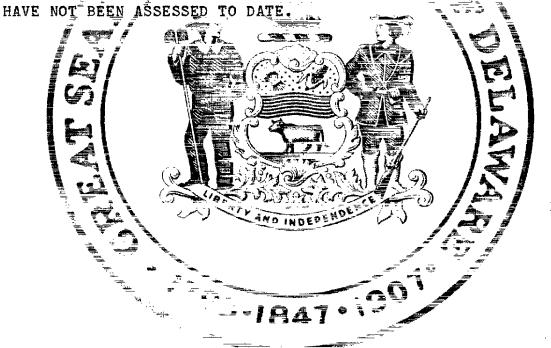
Chairman: Paul Bush	
Address: c/o Bly, Sheffield & Bargar	
3 Lakeview Avenue, Jamestown, New York 14702	
Vice Chairman:	
Address:	
<u>:</u>	SE SE
Director:	AN AN
Address:	FIL AR C 22
	STATE RRATIC
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	<u>-</u> 5
PRESIDENT: Paul Bush	
Address: c/o Bly, Sheffield & Bargar	
3 Lakeview Avenue, Jamestown, New York 14702	
VICE PRESIDENT: Donna J. Doyle	
Address: 12800 University Drive, Suite 650	
Fort Myers, Florida 33907	
SECRETARY: Donna J. Doyle	
Address: 12800 University Drive, Suite 650	
Fort Myers, Florida 33907	
TREASURER: Donna J. Dovie	
Address: 12800 University Drive, Suite 650	
Fort Myers, Florida 33907	
NOTE: If necessary, you may attach an addendum to the application listing additional officer	s, and/or directors.
13. Donno Dong	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the ap	pplication)
14. Vice. President	

# State of Delaware

# Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TRILOGY MEDIA GROUP, 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 SIXTEENTH DAY OF JANUARY, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES



1.1.11 MV CC NVI 86



Edward J. Freel, Secretary of State

AUTHENTICATION:

8870565

DATE:

01-16-98

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