PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



LIMITED LIABILITY FLORIDA DEPARTMENT OF STATE

03 FFR 27 PM 1:50

	COMPANY NSTATEMEN	т 🧶			Secretary					SECRE	TARY OF S	STATE	
1. Limite	UMENT # d Liability Company's CKS PUBLISHI	Name				·	<u>.</u>						
				Mailing O	Office Address								
2320 N. E. 9TH STREET Suite, Apt. #, etc.				Suite, Apt. #, etc.					4. State/Country of Formation				
				3.50					FLORIDA, USA 5. Date Organized or Qualified				
City & Stat	City	City & State					To Do Business in Florida DECEMBER 6, 2001						
FT. LAUDERDALE, FL									6. FEI Number Applied For				
Zip	Cou	ntry	Zip			Country			7.			\$5.00 Addition	Not Applicable
33304	US	SA				<u>.</u>				ATE OF STAT	US DESIRED	for a Certi	ficate of Status
	Name			8. N	arne and Ad	dress of	Current	Registe	ered Agent				
9. I, being Signature of Registered	Suite, Apt. #, Etc SUITE City MIAMI g appointed the regist	UE LAGOON	DRIVE	ed limited	2		familiar	with and	d accept the oblig		Zip Code 33126 napter 608, F.S JANUARY		2
10. Name	es and Street Addres	ses of Managir	ng Members/M	anagers									
Titles	Name of Managing Members/ Managers			- 1	Street Address of Each Managing Member/Manage				ch ager	er City / State / Zip			
M	JOHN BENNETT (MANAGER)				2320 N.E. 9th St				treet	reet Ft. Lauderdale, FL			FL
M	JOSEPH 1	DEVLIN	(MANA	GER)	2890	N.	E. 7	th	Avenue	Po	mpano - 33	Beach,	FL
				67°	rte.		1847F	<u> </u>	63	ממו	0131	649	79
	Cartifi	2 los	. vaa:							-		<u>, , , , , , , , , , , , , , , , , , , </u>	
all fees as if m Signature of Managing M	y that I am managing is reinstatement appl cowed by the limited I ade under oath.	member/mana ication the reas liability compan	ager or the recision for dissoluti	aid. The in	ustee empoveen eliminate of ormation incompanies.	vered to dd, the limited dicated or	n this app	lication	is true and accur	es the requirate, and my	rements of sect signature shall	ion 608.406, F. I have the same	S., and that e legal effect



ACCOUNT NO. : 072100000032

REFERENCE

946369 7108498

AUTHORIZATION :

COST LIMIT : \$ -180

ORDER DATE: February 27, 2003

ORDER TIME: 11:16 AM

ORDER NO. : 946369-005

CUSTOMER NO: 7108498

CUSTOMER: Richard J. Alan Cahan, Esq

Becker & Poliakoff, P.a.

Suite 100

5201 Blue Lagoon Drive

Miami, FL 33126

DOMESTIC FILINGS

NAME: CLICKS PUBLISHING GROUP,

L.L.C.

XX ___ REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY

___ PLAIN STAMPED COPY

_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward, Ext. 1135

EXAMINER'S INITIALS