

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000029176

FILED
Dec 19, 2007
Secretary of State

Entity Name: PRIMETIME MEDIA GROUP, LLC

Current Principal Place of Business:

4000 HOLLYWOOD BLVD
755-SOUTH
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

4000 HOLLYWOOD BLVD
755-SOUTH
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 34-2002335 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HANDLER, HENRY B
2255 GLADES ROAD
218A
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

MURPHY, KURT
4000 HOLLYWOOD BLVD
#755-SOUTH
HOLLYWOOD, FL 33021 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: KURT MURPHY

12/19/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FEINBERG, JOEL
Address: 4000 HOLLYWOOD BLVD #755-SOUTH
City-St-Zip: HOLLYWOOD, FL 33021

Title: CFO () Delete
Name: MURPHY, KURT
Address: 4000 HOLLYWOOD BLVD #755-SOUTH
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KURT MURPHY

CFO

12/19/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date