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COVER LETTER

TO: Registration Division of	n Section Corporations		
subject: <i>Thi</i>	RD HORIZON	MEDIA LL	
	(Name o	of Limited Liability Co	ompany)
Dear Sir or Madam:			
The enclosed Article	es of Correction and fee(s) a	re submitted for filing	
Please return all corr	respondence concerning this	matter to the following	ng:
<i>JASON</i>	(Name of Person)		
	HORIZON ME.DI (Firm/Company)		_
5946 NE	ATH (OURT (Address)	the section of the section of	_
MIAMI,	FL 33/37 (City/State and Zip Code)		_
For further informati	on concerning this matter,	please call:	
JASON_	VEFFERS ame of Person)	at (<u>786</u>	877-5248 & Daytime Telephone Number)
STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, Florida	R ADDRESS: tions ter Circle 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
№ \$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

FIRST	The name of the limited liability company is: THIRD HORIZON MEDIA LLC					
SECO!	•					
(CH	<u>IECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STA</u>	TEMENT				
	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: There are no Mangers on Manging Members listed on Original filing Listed as MANAGER Should be: Mr. JASON FITZERY JEFFERS					
	Listed OB MANAGER Should be: Mr. UASON FITZEDY C					
	MIAMI, FL 33137					
	Was defectively signed. The manner in which the document was defectively the appropriate correction are as follows:	signed and				
Dated:	OCTOBER 7th . 2006 Signature of a member or authorized representative of a member JASON F. JEFFERS Typed or printed name of signee Filing Fee: \$25.00	SECRETARY OF STADIVISION OF CORPORAL 06 OCT 10 PM 2:				
	Certified Copy: \$30.00 (optional)	# ###				