

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000066871

Entity Name: ALL STAR MEDIA LLC

FILED
Oct 06, 2009
Secretary of State

Current Principal Place of Business:

420 LINCOLN ROAD SUITE 221
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

420 LINCOLN ROAD SUITE 221
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 26-1338114 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:

WASSERSTROM, ELLEN
100 W. CYPRESS CREEK ROAD, SUITE 700
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

WASSERSTROM GILMORE, ELLEN
100 W. CYPRESS CREEK ROAD, SUITE 700
FORT LAUDERDALE, FL 33309 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: ELLEN WASSERSTROM GILMORE

10/06/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SONNENSCHN, GAIL
Address: 3500 MYSTIC POINTE DR. #2405
City-St-Zip: AVENTURA, FL 33180

Title: MGR () Delete
Name: SONNENSCHN, HOWARD
Address: 2001 MERIDIAN AVE. #PH16
City-St-Zip: MIAMI BEACH, FL 33139

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: GAIL SONNENSCHN

CEO

10/06/2009

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