2008 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 DEC 10 PM 1:15

DOCUMENT # L07000123698

1. Entity Name
MVISION MEDIA LLC

11202008 REIN-LLC CR2E101 (1/07)

Principal Place of Business	Mailing Address
2545 EAST SUNRISE BLVD, 140 FT. LAUDERDALE, FL 33304	2545 EAST SUNRISE BLVD, 140 FT. LAUDERDALE, FL 33304

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
1994 E. Sunrise Blvd	1994 E. Sunrise blvd
Suite, Apt. #, etc. #140	Suite, Apt. #, etc. #140
City & State: Ft. Lauderdale FL	City & State: Ft. Lauderdale FL
Zip: 33304 Country:	Zip: 33304 Country:

4. FEI Number: 223974584 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number Is Not Acceptable)
City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent. Spiegel & Utrera PA Natalia Utrera, Esq. Vice President 11/24/08

SIGNATURE ______ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $138.75
After January 1, 2009, Fee will be $277.50

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Make check payable to
Florida Department of State

9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE MGR NAME Billy Joe Lambert STREET ADDRESS 1994 E. Sunrise Blvd CITY-ST-ZIP Ft. Lauderdale FL 33304	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP 900138348349 12/01/08--01077--016 **100.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP 1 200139228342 12/23/08--01014--001 **38.75	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP REINSTATEMENT 2008	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: B. J. Lambert Billy Joe Lambert 11/21/08 775-887-0670
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #