L99000009196

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 DEC 11 PM 2:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # L99000009196

1. Limited Liability Company's Name

ITALY TV MARKET, L.L.C.

2. Principal Office Address	**3.** Mailing Office Address
782 N.E. Lejeune Rd.	782 N.W. Lejeune Rd.
Suite, Apt. #, etc. Suite 428	Suite, Apt. #, etc. Suite 428
City & State Miami, Florida	City & State Miami, Fla.
Zip 33126 Country U.S.A.	Zip 33126 Country U.S.A.

4. State/Country of Formation: Florida-U.S.A.

5. Date Organized or Qualified To Do Business in Florida: 12-27-99

6. FEI Number: 65-0976600 ☐ Applied For ☐ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐ $5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name: MAGALI L. PUIG

Street Address (P.O. Box Number is Not Acceptable): 782 N.W. LEJEUNE ROAD

Suite, Apt. #, Etc.: 428

City: MIAMI State: FL Zip Code: 33126-5536

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent: Magali L. Puig Date: 11-07-03
REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
Mgr.	CAPITAL TRENDS HOLDING CORP.	782 N.W. Lejeune Rd.	Miami, Florida 33126
Mgr.	ITALTEAM ENTERPRISE CORP.	782 N.W. Lejeune Rd.	Miami, Florida 33126

REINSTATEMENT 2003

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11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Managing Member/Manager: Antonio Lejeune Date: 11/7/03 Daytime Phone # (305) 442-8093