

# M000000000902



ACCOUNT NO. : 072100000032

REFERENCE : 688227 4804310

AUTHORIZATION *Patricia Pujato*

COST LIMIT : \$ 1175.00

ORDER DATE : May 5, 2000

ORDER TIME : 11:25 AM

ORDER NO. : 688227-010

900003246749-1

CUSTOMER NO: 4804310

CUSTOMER: Dan Hulea, Legal Asst  
Walter Conston Alexander &  
90 Park Avenue  
14th Floor  
New York, NY 10016

FOREIGN FILINGS

*M-902*

NAME: NEWSPRNET INTERACTIVE LLC

FILED  
00 MAY 10 PM 12:30  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds

RECEIVED  
00 MAY 10 PM 12:12  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE FLORIDA

*W 5/10*

*125 + 1050<sup>00</sup>*

*4*

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. NEWSPRONET INTERACTIVE LLC  
(Name of foreign limited liability company)

2. Delaware 3. 58-2367697  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 01-15-98 5. Perpetual  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. May 1999  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))

7. 1410 SW 159th Avenue  
Pembroke Pines, FL 33027  
(Street address of principal office)

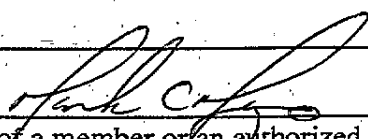
8. If limited liability company is a manager-managed company, check here

9. The name and usual business addresses of the managing members or managers are as follows:  
Mark Mayo, 1410 SW 159th Avenue, Pembroke Pines, FL 33027  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

FILED  
00 MAY 10 PM 12:30  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Any lawful business  
purpose \_\_\_\_\_

  
\_\_\_\_\_  
Signature of a member or an authorized representative of a member.  
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)  
Mark Mayo  
\_\_\_\_\_  
Typed or printed name of signee.

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

NEWSPRONET INTERACTIVE LLC

2. The name and the Florida street address of the registered agent and office are:

Corporation Service Company

(Name)

1201 Hays Street


Florida street address (P.O. Box **NOT** ACCEPTABLE)

Tallahassee

FL 32301

City/State/Zip

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.*



(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

**FILED**  
00 MAY 10 PM 12:30  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NEWSPRONET INTERACTIVE LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF MAY, A.D. 2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NEWSPRONET INTERACTIVE LLC" WAS FORMED ON THE FIFTEENTH DAY OF JANUARY, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

FILED  
MAY 10 PM 12:30  
SECRETARY OF STATE  
WALLAHASSEE FLORIDA



*Edward J. Freel*

Edward J. Freel, Secretary of State

2849445 8300

001230610

AUTHENTICATION: 0422098

DATE: 05-05-00