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#### **Document Number Only**

CT Corporation System 660 East Jefferson Street Tallahassee, FL 32301 850-222-1092

**DATE:** 10 / 3

700003412577--6 -10/03/00--01020--027 \*\*\*\*125.00 \*\*\*\*125.00

#### Corporation(s) Name Bosell Genup C.C ()Amendment ()Merger ()Profit ()Nonprofit Foreign ()Dissolution ()Mark ()Withdrawal MILC ()Other ()UBR ()Limited Partnership ()Reinstatement ()Fititious Name ()UCC () 1 or () 3 \*\*\*Special Instructions\*\* ()CUS ()Photocopies ()Certified Copy ( )arts/ameds/mergers ( ) Other-See Above ()Will Wait (XXX)Walk in (XXX)Pick-up

Please Return Filed Stamped Copies To:

Jeffrey Butterfield

Thank You!

MOU-2049 File First

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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

	(Name of foreig	gn lix	nited liability company)	
Deleviore		2	36-1088161	
Delaware  (Jurisdiction under the la	w of which foreign limited liabilit		(FEI number, if applicable)	-
company is organized)	W OI WINDII IOIOISII MIIIIIOU IIIO	,		
0/20/2000		_	perpetual	
. 8/29/2000 (Date of C	Organization)	Э.	(Duration: Year limited liability company will-cease to	-
(Date of C	, gambanon,		exist or "perpetual")	
September 1, 2000			ARE O	
(Date fir	st transacted business in Florida. (	See :	sections 608.501, 608.502, and 817.155, F.S.)	$\equiv$
•			rm-<	<u></u>
Austin Centre, 6950 Cy	press Rd., Ste. 209, Ft. Lauderdal	e, FI	. 33317 E. PM 12: 0	. 🖰
			1.07 1.07 1.07	
	(Street addr	ess c	f principal office)	
		,		
If limited liability c	ompany is a manager-manag	ea c	company, check here	
	11 64		harra an managara ara aa fallawa:	
The usual business	addresses of the managing n	em	bers or managers are as follows:	
/ m - N/ - 1 / 0		at C	hisago II 60611	
c/o True North Comm	unications Inc., 101 East Erie Stre	CL, C	meago, it. 60011	-
	<u> </u>			-
		- 00	In a state of the continue to the official having custody of the	· · · · · · · · · · · · · · · · · · ·
). Attached is an original (	eminicate of existence, no more utal	1900	days old, duly authenticated by the official having custody of n	Car
e junisdiction under the lay	Voi Which it is organized. (A photo	min.	vis not acceptable. If the certificate is in a foreign language, a	
anslation of the certificate t	under oath of the translator must be	SUOL	illitt.)	
		د		
1. Nature of business	s or purposes to be conducted	a or	promoted in Florida:	-
advertising services				- <b>•</b>
	What has	Κ-		
	Lander	0		
	Signature of a member or ar	aut	horized representative of a member.	
	(In accordance with section 608.408(	3), F	S., the execution of this document constitutes rry that the facts stated herein are true.)	
	an actionalism moder bie behaldes Of			
			munications Inc., the sole member	

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:

Bozell Group, L.L.C.	TAT	9	
2. The name and the Florida street address of the registered agent and office are:		0CT -3	FILE
C T Corporation System		PM-I	D
(Name)	100 100 100 100 100 100 100 100 100 100	:각	
	ADA ADA	90	
c/o C T Corporation System, 1200 South Pine Island Road	_		
Florida street address (P.O. Box NOT ACCEPTABLE)			
<del></del>			

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..

City/State/Zip

C T Corporation System

James M. Halpin Assistant Secretary

Plantation

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

FL054 - 9/28/99 C T System Online

## State of Delaware

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## Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BOZELL GROUP, L.L.C." 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 TWENTY-SEVENTH DAY OF SEPTEMBER, A.D.

2000.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE
NOT BEEN ASSESSED TO DATE.

Edward J. Freel, Secretary of State

AUTHENTICATION: 0700888

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3281044

DATE: 09-27-00