CT CORPORATION SYSTEM

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660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

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 foreign limited liability company) (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) December 31, 2000 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual") 6. January 1, 2001 (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.) 3102 Oak Lawn Avenue, Suite 215 Dallas, Texas (Street address of principal office) 8. If limited liability company is a manager-managed company, check here 9. The usual business addresses of the managing members or managers are as follows: 3102_Oak Lawn Avenue, Suite 215 Dallas, TX 75219 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: Internet advertising 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.)

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 IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:		·	
HBCi, LLC			
2. The name and address of the registered agent and office is:			 .
c/o CT Corporation System			-
(Name)			;
1200 South Pine Island Road			
(P.O. Box or Mail Drop Box NOT ACCEP	TABLE)	 ;	Saun · ·
Plantation, FL 33324	 		. ma
(City/State/Zip)			~ - ,
Having been named as registered agent and to accept service of liability company at the place designated in this certificate, I hereby agent and agree to act in this capacity. I further agree to complete performance of my duties, and obligations of my position as registered agent.	accept the appointly with the provis	ntment as regist sions of all stat	ered tutes
_ Comin Brown	4/4/01		استان المحقق المناسبة الحراق الله الله الله الله الله الله الله ال
(Signature) Connie Bryan, Special Asst. Secy.	(Date)	2: 22 PRIDA	

Filing Fee: \$ 35 for Designation of Registered Agent

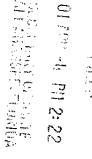
State of Delaware

PAGE 1

Office of the Secretary of State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HBCI, 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 THIRD DAY OF APRIL, A.D. 2001.

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





Darriet Smith Windson, Secretary of State

AUTHENTICATION: 1061493

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DATE: 04-03-01