## W03000001d39



ACCOUNT NO. : 072100000032

REFERENCE : 673059 4375356

AUTHORIZATION <:

COST LIMIT : \$ 125.00

ORDER DATE : July 22, 2002

ORDER TIME : 12:04 PM

ORDER NO. : 673059-030

CUSTOMER NO: 4375356

CUSTOMER: Ms. Christina V. Lynge

Sfx Entertainment, Inc. 220 West 42nd Street

New York, NY 10036

FOREIGN FILINGS

NAME: BLUES CLUES TOURING, LLC

XXXX QUALIFICATION (TYPE: LL) 90000552	94879 <u>-</u>	1
Name Availability PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	ann R Person R Person	
Conument  PLAIN STAMPED COPY	02 JUI SECRE TALLAH	-
	- 24 TARY ASSE	FIL
CONTACT PERSON: Norma Hull EXT# 1115	PH S	EO
EXAMINER:	TATE ORICA	
W P. Verifyer DCC		

26P10000060M

1 page

### 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:

۱.,	Blues Clues Touring, LLC	_
	(Name of foreign limited liability company)	
2	Delaware 3. 13-4104201	
(	Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
ŧ.	12/23/99 5. Perpetual	
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	_
5.	Upon qualification	
	(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)	-
7.	c/o SFX Family Entertainment, Inc., 220 West 42nd Street	
	THAT UL	1
	New York, NY 10036 (Street address of principal office)	- <u>=</u>
	(bacet address of principal entire)	ED
3.	If limited liability company is a manager-managed company, check here \[ \]	
€.	The name and usual business addresses of the managing members or managers are as follows:	
	SFX Family Entertainment, Inc. (Sole Member), 220 West 42nd Street,	
	DIA Family Bifeledalimente, Inc. (bote Membel), 220 Nebe 12nd believe,	_
	New York, NY 10036	_
		_
		-
10.	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of re	ecords
	the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language	
	translation of the certificate under oath of the translator must be submitted.)	
IJ	. Nature of business or purposes to be conducted or promoted in Florida: Promotion of Live	_
	Entertainmment	
		-
	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.)	
	Dale Head	

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.

Blues Clues Touring, LLC		
2. The name and the Florida street address of the registered agent and office are:	02 J SECF TALL/	
Corporation Service Company	JUL CRETI	
(Name)	UL 24 PH ETARY OF HASSEE, F	T   L   U
1201 Hays Street	S 2	
Florida street address (P.O. Box NOT ACCEPTABLE)	M 2: 05 F STATE FLORIDA	
Tallahassee FL 32301		
(City/State/Zip)	. **	i.

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.

Tabatha Miller Asst VP (Signature)

1. The name of the Limited Liability Company is:

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

#### PAGE 1

# Delaware

### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BLUES CLUES TOURING, 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 TWENTY-SECOND DAY OF JULY, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BLUES CLUES TOURING, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF DECEMBER A.D. 1999.

ARE CARREST AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE

VERY PAID TO DATE.

STORY

S BEEN PAID TO DATE.



Varriet Smith Hindson Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1896006

DATE: 07-22-02

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