## 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# M03000000785

Entity Name: BURSON-MARSTELLER, LLC

FILED Feb 11, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

230 PARK AVENUE SOUTH NEW YORK, NY 10003

Current Mailing Address: New Mailing Address:

230 PARK AVENUE SOUTH NEW YORK, NY 10003

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NATIONAL REGISTERED ANGENTS, INC.

9200 SOUTH DADELAND BLVD., SUITE 508

UNITED CORPORATE SERVICES, INC.
9200 SOUTH DADELAND BLVD.- SUITE 508

MIAMI, FL 33156 US MIAMI, FL 33156 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MICHAEL A. BARR 02/11/2008

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition

 Name:
 BURCHETT, CHETT
 Name:
 PRZYBSKI, PAT

 Address:
 230 PARK AVENUE SOUTH
 Address:
 230 PARK AVENUE SOUTH

 City-St-Zip:
 NEW YORK, NY 10003
 City-St-Zip:
 NEW YORK, NY 10003

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition

 Name:
 DELPRIORE, JOE
 Name:
 NEUMAN, THOMAS O

 Address:
 230 PARK AVENUE SOUTH
 Address:
 125 PARK AVENUE

 City-St-Zip:
 NEW YORK, NY 10003
 City-St-Zip:
 NEW YORK, NY 10017

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 HOWE, MARY ELLEN
 Name:

 Address:
 125 PARK AVENUE
 Address:

 City-St-Zip:
 NEW YORK, NY 10017
 City-St-Zip:

Title: MGR (X) Delete Title: ( ) Change ( ) Addition

 Name:
 NEUMAN, THOMAS O
 Name:

 Address:
 125 PARK AVENUE
 Address:

 City-St-Zip:
 NEW YORK, NY 10017
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: THOMAS O. NEUMAN MGR 02/11/2008