

Florida Department of State

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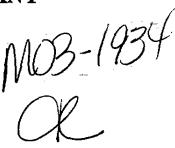
Account Name : C T CORPORATION SYSTEM

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FOREIGN LIMITED LIABILITY COMPANY

Orlando Cable Advertising Interconnect, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00



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

		Cable Advertising				
(Name of foreign limited liability company)						
	Delaware	3. _				
(Jurisdiction unde	Delaware f the law of which foreign limite company is organized)	ed liability	(FEI numbe	rr, if applicable)		
	Merch 11, 2003	5 .	Perp	ental		
(Do	ate of Organization)	(D	Perp uration: Year limited exist or "	liability company v perpetual ^e)	vill cease to	
		Upon Filing				
(L	Date first transacted business in l	Florida. (See section	s 608.501, 608.302, a	ind 817.155, F.S.)	, i.e.	
	3919 Ro	osewood Way, Orlai	ado, Florida 32808			
		/ N			14(1)	
	(\$6	rect address of princ	ipal office)	•		
The name and	usual business addresses (members or mana	•	ws:	
The name and				•	ws:	
Associated is an or	usual business addresses of	of the managing	members or mana	gers are as follo	ng custody of	
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Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ORLANDO CABLE ADVERTISING INTERCONNECT, 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 TWELFTH DAY OF JUNE, A.D. 2003.

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

3635010 8300

Harriet Smith Windson, Secretary of State
AUTHENTICATION: 2470149

030390071 DATE: 06-12-03

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.

2. The name	and the Florida street	address of	the registe	red agent and offi	ice are:
	C T Corporation System				
(Name)				and the second s	
					··· •
				uth Pine Island Road	
	Florida	Street address	s (F.U. Box)	NOT Acceptable)	i.
					<u> </u>
	Plantation,	600	FL	33324	
		(City	/State/Zip)		ÿ*
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Having been		Land Barrata	certificate	, I hereby accept	ek a aumainem aut an