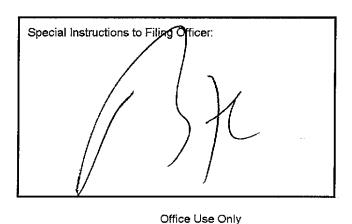
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status





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ALLAHASSEE, ELSTATE



ACCOUNT NO. : 072100000032

REFERENCE : 228586

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: February 28, 2005

ORDER TIME : 11:16 AM

ORDER NO. : 228586-005

CUSTOMER NO: 7103124

CUSTOMER: Ms. Tonya Morse

Dow Lohnes & Albertson

Suite 800

1200 New Hampshire Avenue, N.w

Washington, DC 20036-6802

FOREIGN FILINGS

NAME: COX MEDIA, L.L.C.

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
YELD COPY
CERTIFIED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan -- EXT# 2955

EXAMINER:



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 1, 2005

AMANDA HADDAN CSC

SUBJECT: COX MEDIA, L.L.C. Ref. Number: W05000010484

We have received your document for COX MEDIA, L.L.C. and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

The document must contain the names and street addresses of the members or managers of the limited liability company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6917.

Gretchen Harvey Document Specialist Supervisor

Letter Number: 005A00014196

RESUBMIT



APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION? 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:

IMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN TH	E SIATE OF FLORIDA:
Cox Media, L.L.C. (Name of Foreign Limited	Liability Company)
Delaware	3 58-144671
(Jurisdiction under the law of which foreign limited liability company is organized)	
9/15/1980	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
(Date first transacted business in F (See sections 608.501 & 608.502 F.)	lorida, if prior to registration.) S. to determine penalty liability)
6205 Peachtree Dunwoody Road	
•	
Atlanta, GA 30328	
(Street Addres	s of Principal Office)
. If limited liability company is a manager-manage	d company, check here
. The name and usual business addresses of the mar	naging members or managers are as follows:
COXCOM, INC.	<u> </u>
6205 Peachtree Dunwoody Road	
Atlanta Coorda 20229	
Atlanta, Georgia 30328	
 Attached is an original certificate of existence, no more than 90 e jurisdiction under the law of which it is organized. (A photoco anslation of the certificate under oath of the translator must be sub 	
1. Nature of business or purposes to be conducted of	or promoted in Florida: acquire, invest in,
own, construct, maintain, operate, promo	te, sell, and develop telecommunications
Am	
Signature of a member or an a	uthorized representative of a member.
(In accordance with section 608.408(3),	F.S., the execution of this document constitutes
an affirmation linder the penalties of ner	rjury 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, FLÖRIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

Corporation Service	Company	
	(Name)	<u> </u>
1201 Hays Street		- Anny Company
Florida Street A	Address (P.O. Box NOT ACCEPTABLE)	
Tallahassee	F) 32301	
	City/State/Zip	

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, Florida Statutes.

Corporation Service Company

By: Deborah D. Skipper
(Signature) Asst. V. Pres.

1. The name of the Limited Liability Company is:

Cox Media, L.L.C.

\$ 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 "COX MEDIA, 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-EIGHTH DAY OF FEBRUARY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COX MEDIA, L.L.C." WAS FORMED ON THE FIFTEENTH DAY OF SEPTEMBER, A.D. 1980.

Darriet Smith Hindson

AUTHENTICATION: 3709123

0899241 8300

050167064

DATE: 02-28-05