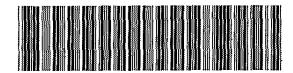
M05000004161

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status
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SECRETARY OF STATE

. COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: EAST GATE MEDIA, LLC (Name of Limited Liability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
JAMES P. FABER, CEO (Name of Person)
EAST GATE MEDIA, LLC (Firm/Company)
100 S. BISCAYNE BLUD. (Address)
(Address)
MIAMI, FL 33131 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
TAMES P. FABER at (786) 472 - 9088 (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \times \text{S30.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)

1. The name of the limited liability com Department of State is: EASTEATE	mpany as it appears on the records of the Florida MEDIA, LLC
2. This entity was formed under the law	s of: DELAWARE.
3. This entity was authorized to transact and its Florida document/registration nur	t business in Florida on 7/27/2005 mber is MO \$000004161
4. The name and address of each manage	er or managing member is as follows:
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	FABER, J.P. 5825 LAGORCE DRIVE MIAMI BEACH FL 33140
<u> </u>	07FB
·	6 P
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Required Signature: (Signature	e of Manager, Managing Member or Member)

Filing Fee: \$25