# M05000006171

| (Requestor's Name)                      |              |
|---|--------------|
| (Address)                               | <del>_</del> |
| (Address)                               |              |
| (City/State/Zip/Phone #)                |              |
| PICK-UP WAIT MA                         | IL           |
| (Business Entity Name)                  |              |
| (Document Number)                       |              |
| Certified CopiesCertificates of Status  |              |
| Special Instructions to Filing Officer: |              |
| Office Use Only                         |              |



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| CORPDIRECT AGE<br>515 EAST FARK AV<br>TALLAHASSEE, FL<br>222-1173 | ENUE         | merly CCRS)                               |                                 |
|---|--------------|---|---------------------------------|
| FILING COVER<br>ACCT. #FCA-14                                     | SHEET        |   |                                 |
| CONTACT:  | CINDY        |   |                                 |
| DATE:   | 11-4-05      |   |                                 |
| REF. #:   | 0173.44083   |   |                                 |
| CORP. NAME:   | SALEM MI     | EDIA OF ILLINOIS, LLC                     |                                 |
| ( ) ARTICLES OF INCO  | ORPORATION   | ( ) ARTICLES OF AMENDMENT                 | ( ) ARTICLES OF DISSOCUTION     |
| ( ) ANNUAL REPORT   |              | ( ) TRADEMARK/SERVICE MARK                | ( ) FICTITIOUS NAME             |
| ( XX ) FOREIGN QUAL   | IFICATION    | ( ) LIMITED PARTNERSHIP                   | ( ) LIMITED LIABILITY           |
| ( ) REINSTATEMENT   |              | ( ) MERGER                                | ( ) WITHDRAWAL                  |
| ( ) CERTIFICATE OF (  | CANCELLATION |   |                                 |
| ( ) OTHER:  |              |   |                                 |
| STATE FEES PI<br>FILINGS.   | REPAID WI    | TH CHECK# <u>2891</u> FOR \$ <u>265</u> . | .00 ALSO TO BE APPLIED TO OTHER |
| AUTHORIZATI   | ON FOR A     | CCOUNT IF TO BE DEBITE                    | D:                              |
|   |              | COST LIN                                  | MIT: \$                         |
| PLEASE RETUI  | RN:          |   |                                 |
| ( ) CERTIFIED COPY  |              | ERTIFICATE OF GOOD STANDING               | (X) PLAIN STAMPED COPY          |

Examiner's Initials

#### 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 BI NINESS IN THE STATE OF FLORIDA:

| Onlaw Mentine of the start of  | ETERO ETITE OF FISHESE  |
|--|---|
| 1. Salem Media of Illinois, LLC<br>(Name of For                        | reign Limited Liability Company)  |
| <sub>2.</sub> Delaware   | 3. 52-2295222   |
| (Jurisdiction under the law of which foreign lim company is organized) | nited liability (FEI number, if applicable)   |
| 4. 12-20-2000 (Date of Organization)                                   | 5. Perpetual (Duration: Year limited liability company will cease to  |
| 6. Upon qualification  | exist or "perpetual")   |
| (Date first transacted   | business in Florida, if prior to registration.)  & 608.502 F.S. to determine penalty liability)   |
| 7. 4880 Santa Rosa Road  | <del></del>   |
| Camarillo, CA 93012  |   |
| (S   | Street Address of Principal Office)   |
| 8. If limited liability company is a manag                             | er-managed company, check here 🗸  |
| 9. The name and usual business addresses                               | s of the managing members or managers are as follows:   |
| Salem Media Corporation  |   |
| 4880 Santa Rosa Road   |   |
| Camarillo, CA 93012  |   |
|  | o more than 90 days old, duly authenticated by the official having custody of records in<br>d. (A photocopy is not acceptable. If the certificate is in a foreign language, a<br>or must be submitted.) |
| 11. Nature of business or purposes to be of                            | conducted or promoted in Florida: Radio Broadcasting  |
|  | A   |
|  |   |
| (In accordance with section  | ther or an authorized representative of a member. on 608.408(3), F.S., the execution of this document constitutes enalties of periody that the facts stated herein are true.)                           |
| -  | e President/Secretary of Salem Media Corp., its Manager   |

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.

| Salem Media of Illinois, LLC            |   |  |
|---|---|--|
| . The name and the Florida street addre | ess of the registered agent and office are: |  |
| NRAI Services, In                       | C.  |  |
|   | (Name)                                      |  |
| 2731 Executive F                        | Park Drive, Suite 4                         |  |
| Florida Street A                        | Address (P.O. Box NOT ACCEPTABLE)           |  |
| Weston                                  | <sub>FL</sub> 33331                         |  |
|   | 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.

Paul J. Hagan, Assistant Secretary

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

## Delaware

PAGE 1

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SALEM MEDIA OF ILLINOIS, 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 ELEVENTH DAY OF OCTOBER, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SALEM MEDIA OF ILLINOIS, LLC" WAS FORMED ON THE TWENTIETH DAY OF DECEMBER, A.D. 2000.

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

Darriet Smith Windson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4215609

DATE: 10-11-05

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