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Division of Corporations

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Account Number : FCA000000023

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Fax Number

(850) 878-5926

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

Grant Broadcasting System II, LLC

Certificate of Status	1
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### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION GOESER, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

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De	lawero		3	65-04194	03	aber, if applicable)		
	abstrict in ordenized) argustion more, me n	law of which foreign limited l	ability		( S.P.C SIME	noar, it abbitionis		
Q	tober 16, 1992		5	Perpetual				
	(Date of	Organization)	_	(Duratio	n: Year limit "perpetual")	d liability company	will coor	o to
Uр	on qualification							
		(Date first transacted busine (See sections 608.501 & 608	se in Flo 502 P.S.	rida, if paior to determin	e penalty high	n.) Žity)		
914	Middle River Drive	e, Suite 409				· · · · · · · · · · · · · · · · · · ·		
Fo	rt Landardale, Florid		····					
	•	(Street	Address	of Principal	Office)			
lf	limited liability o	company is a manager-m	anaged	company,	check here			• ,
T)	e name and usua	al business addresses of t	he mana	ging mem	ibers or ma	nagers are as fol	laws:	
<u>c</u>	. Andrew Pfeiffer	915 Middle River Drive,	Suits 409	Fort Laude	rdale, FL 33	304		• .
M	(ark Ryan	915 Middle River Drive,	Suite 409	, Fort Laude	erdale, FL 33	304		
			<u>(</u>	<u>.                                    </u>				
n a	y of records in the foreign language	al certificate of existence, no jurisdiction under the law of e, a translation of the certs or purposes to be condu	f which difficate t	it is organis under oath	zed. (A phot of the tran	ocopy is not accep slator must be si	otable. If abunitted	the certi
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	(	Signature of a member of (In secondaries with section 608. on affirmation under the penetic	r an aut 108(3), P.&	ofized re	presentative	phost constitutes		
	<u> </u>	Mark Ryan, Chief Financial C				·		
	_	The sell and						

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#### 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 RECESTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

Crara Produceanic	g System II, LLC	a 🐇
2. The name ar	d the Florida street address of the registered agent and office are:	o7 JUN -8
	C T Corporation System	့် တဲ
	(Name)	至何
•	1200 South Pine Island Road	_ 
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
		and the text of the second
	Plantation, Florida 33324	" gro + fee!
e feet	Plantation, Florida 33324 City/State/Zip	The state of the first
el Carlos III.		- Carrieran
Havine been na	City/State/Zip	4407 15. 4 . 4
Having been na liability compan	Chy/State/Zip  ned as registered agent and to accept service of process for the above	stated ilmited
liability compan	City/State/Zip  ned as registered agent and to accept service of process for the above  y at the place designated in this certificate. I hereby accept the appoint  to act in this capacity. I further agree to comply with the provisions	stated itmited siment as registered of all statutes
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Certified Copy (eptional)
Certificate of Status (optional)

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#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GRANT BROADCASTING SYSTEM II, 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 EIGHTE DAY OF JUNE, A.D. 2007.

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

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Warriet Smith Window Secretary of Shota

AUTHENTICATION: 5741387

DATE: 06-08-07