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PICK-UP	☐ WAIT	MAIL		
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(D	ocument Number)	· · · · · · · · · · · · · · · · · · ·		
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				
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T. HAMPTON

MAR 3 1 2008

EXAMINER

COVER LETTER

Registration Section Division of Corporations

TO:

	•
SUBJECT: SOURCE INTERLINK MEDIA, LLC	
(Name of Limited Liability Co	ompany)
The enclosed "Application by Foreign Limited Liability Company Florida," Certificate of Existence, and check are submitted to regis liability company to transact business in Florida	
Please return all correspondence concerning this matter to the following	owing:
MARIE ROSE WILLIS	<u> </u>
(Name of Person)	
SOURCE INTERLINK MEDIA, LLC	
(Firm/Company)	
27500 Riverview Center Blvd.	
(Address)	
Bonita Springs, FL 34134	
(City/State and Zip Cod	e)
For further information concerning this matter, please call:	
MARIE ROSE WILLIS at (239	949-4450 X6975
(Name of Person) (Area Code	e & Daytime Telephone Number)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Clifton Building Tallahassee, FL 32314 STREET AD Division of Corporations Clifton Building Tallahassee, FL 32314	orporations ng ve Center Circle
Enclosed is a check for the following amount: [2] \$125.00 Filing Fee	ng Fee & \$\Bigcup \\$160.00 Filing Fee, Certificate tified Copy of Status & Certified Copy

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 BUSINESS IN THE STATE OF FLORIDA:

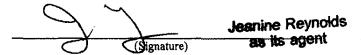
1. SOURCE INTERLINK MEDIA, LLC (Name of Foreign Limited)	4 Ý i.	hility Company)		_
(Name of Foreign Limited	J Lla	ionity Company)		
2. Delaware	3	13-3617238		
(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)		_
4. 5/14/1991	5.	PERPETUAL		
(Date of Organization)	٥.	(Duration: Year limited liability company wi exist or "perpetual")	ll cease to)
6	C1	J. (C)		_
(Date first transacted business in (See sections 608.501 & 608.502 F	.S. t	da, if prior to registration.) o determine penalty liability)		
7. 27500 Riverview Center Blvd., Bonita Spring	s, F	L 34134		_
27500 Riverview Center Blvd., Bonita Springs,	FL	34134		
(Street Addre	ss of	Principal Office)		_
8. If limited liability company is a manager-manage	ed c	ompany, check here		
9. The name and usual business addresses of the ma	anag	ging members or managers are as follow	/s:	
SOURCE INTERLINK COMPANIES, INC.				
27500 Riverview Center Blvd., Bonita Springs,	FL	34134		_
10. Attached is an original certificate of existence, no more than 9 the jurisdiction under the law of which it is organized. (A photoe translation of the certificate under eath of the translator must be sull. Nature of business or purposes to be conducted	opy Jbmi	is not acceptable. If the certificate is in a foreign latted.)	anguage, a	
Leugh				 ·
	, F.S	norized representative of a member, the execution of this document constitutes y that the facts stated herein are true.)	08 MAR	SE
Secretary of Source Interlin	-		ÁR	S E
Typed or print	ed 1	name of signee	22	유지구

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.

The name of the Limited Liability Company is: SOURCE INTERLINK MEDIA, LLC				
	nd the Florida street address of the registered agent and office are:			
	Corporation Service Company (Name)			
	1201 Hays Street Florida Street Address (P.O. Box NOT ACCEPTABLE)			
	Tallahassee FL 32301			

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.



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

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SOURCE INTERLINK MEDIA, 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 SEVENTEENTH DAY OF MARCH, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SOURCE INTERLINK MEDIA, LLC" WAS FORMED ON THE FOURTEENTH DAY OF MAY, A.D. 1991.

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

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

080325314

Harriet Smith Windsor, Secretary of State AUTHENTICATION: 6455532

Varuet Smith Hind

DATE: 03-17-08

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