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PICK-UP	WAIT	MAIL				
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Certified Copies	Certificates of	Status				
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Special Instructions	to Filing Officer:					
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L. S	SELLENO	·				
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EXAMINER						
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COVER LETTER

SUBJECT:	LO	CAL FOCUS LLC
	(Name of L	imited Liability Company)
	Existence, and check ar	Liability Company for Authorization to Transact Busine submitted to register the above referenced foreign limits.
Please return all correspondence	ondence concerning th	is matter to the following:
	CHR	SISTINE E FRIES
		(Name of Person)
	CHRIS	TINE E FRIES, PA
		(Firm/Company)
	41.51	ON CHAROUN LAND
	4151	SW SUNDOWN LANE (Address)
# 3 1 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		(Fiduress)
	PALM	I CITY, FL 34990
		y/State and Zip Code)
For further information of	concerning this matter,	please call:
CHRIS	STINE E FRIES	at 772-288-3797 EXT 3
(Na	ame of Person)	(Area Code & Daytime Telephone Number)
MAILING ADI	PRESS:	STREET ADDRESS:
Division of Corp	orations	Division of Corporations
P.O. Box 6327		Clifton Building
Tallahassee, FL	32314	2661 Executive Center Circle Tallahassee, FL 32301



March 3, 2009

CHRISTINE E. FRIES 4151 SW SUNDOWN LANE PALM CITY, FL 34990

SUBJECT: LOCAL FOCUS LLC Ref. Number: W09000009994

We have received your document for LOCAL FOCUS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the complete principal's office address.

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) 245-6967.

Letter Number: 109A00007280

Leslie Sellers Regulatory Specialist II

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: LOCAL FOCUS LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.") DELAWARE 2. DELAWARE
(Jurisdiction under the law of which foreign limited liability company is organized) PERPETUAL

(Duration: Year limited liability company will cease to exist or "perpetual") 11/26/2008 (Date of Organization) (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 2090 PALM BEACH LAKES BLVD STE WEST PALM BEACH FL 33409 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: FOCUS 360 LLC 83 STURGES HIGHWAY, WESTPORT, CT 06880 WILLIAM J 2090 PALM BEACH LAKES BLVD, #300, W. PALM BEACH FL 33409 MCENTEE TIL 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: MEDIA ADVERTISING SERVICES & ADMINISRATION Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true)

PHILIP BROWN, CEO, FOCUS 360 LLC
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.

1. The name of the	ne Limited I	Liability Company	is:		
LOCAL FOCUS	LLC				
If name unavailab	le, the alter	nate name to be u	sed in the st	ate of Florida is:	
2. The name and	the Florida	street address of t	he registere	d agent and office are:	
		WILLIAM	J MCENTE	E III	
-	(Name)				
_	2090) PALM BEACH	LAKES B	LVD SUITE 300	_
Florida Street Address (P.O. Box NOT ACCEPTABLE)					
_	WEST	PALM BEACH	FL	33409	
-		Ci	ty/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.



\$ 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 "LOCAL FOCUS 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 TENTH DAY OF DECEMBER, A.D. 2008.

SECNETARY OF STATE

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Parine Parine

Warnet Smita Windson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 7013020

DATE: 12-10-08