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963027 4806702

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CUSTOMER NO: 4806702

Schubert Leveille, Legal Asst CUSTOMER:

Metromedia Company One Meadowlands Plaza

East Rutherford, NJ 07073

#### FOREIGN FILINGS

NAME: GUEST INFORMANT, L.L.C.

200002669192--1

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson

Name Availability Document Examiner Updater Updater Verifyer Acknowledgemer ... P. Verifyer



### 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:

| (.  | Name of foreign lim                 | ited liability company)   |  |
|---|-------------------------------------|---|--|
| _ Delaware  | ,<br>-                              | G (FEI number, if app   |  |
| (Jurisdiction under the law of which foreig company is organized)                                   | n limited liability                 | (FEI number, if app   | licable)   |
| . July 14, 1997   |                                     | 5. December 31, 2047  |  |
| (Date of Organization)  |                                     | (Duration: Year limited liability of exist or "perpetual")                | company will cease to  |
|   | _                                   |   | -  |
| (Date first transacted busine   | ess in Florida. (See se             | ections 608.501, 608.502, and 817.15                                      | 5, F.S.)   |
| •   | -                                   |   |  |
|   |                                     |   |  |
| 21200 Erwin Street, Woodland Hil  |                                     |   |  |
|   | (Street address of                  | principal office)   |  |
| List name, title, and business address will manage the foreign limited liabilities.                 | of each managir<br>ity company in F | g member[MGRM] or manage lorida: (attach additional page                  | er[MGR]who if necessary)                                       |
| List name, title, and business address will manage the foreign limited liabilinated NAME & ADDRESS: | of each managing ity company in F   | ig member[MGRM] or manage lorida: (attach additional page NAME & ADDRESS: | er[MGR]who if necessary) TITLE:                                |
| will manage the foreign limited liabili   | ity company in F                    | lorida: (attach additional page   | if necessary)  |
| will manage the foreign limited liabili  NAME & ADDRESS:  | ity company in F                    | lorida: (attach additional page   | if necessary)  |
| will manage the foreign limited liabili  NAME & ADDRESS:  | ity company in F                    | lorida: (attach additional page   | if necessary)  |
| will manage the foreign limited liabili  NAME & ADDRESS:  | ity company in F                    | lorida: (attach additional page   | if necessary)  |
| will manage the foreign limited liabili  NAME & ADDRESS:  | ity company in F                    | lorida: (attach additional page   | if necessary)  |
| will manage the foreign limited liabili  NAME & ADDRESS:  | ity company in F                    | lorida: (attach additional page  NAME & ADDRESS:                          | if necessary)  |
| will manage the foreign limited liabili  NAME & ADDRESS:  | ity company in F                    | lorida: (attach additional page  NAME & ADDRESS:                          | if necessary)  TITLE:  SECRETA- DIVISION OF 98 OCT 2           |
| will manage the foreign limited liabili  NAME & ADDRESS:  | ity company in F                    | lorida: (attach additional page  NAME & ADDRESS:                          | if necessary)  TITLE:  SECRETANDIVISION OF 98 OCT 2            |
| will manage the foreign limited liabili  NAME & ADDRESS:  | ity company in F                    | lorida: (attach additional page  NAME & ADDRESS:                          | TITLE:  SECRETARY OF CORPOR  SECRETARY OF CORPOR  98 OCT 21 PM |
|   | ity company in F                    | lorida: (attach additional page  NAME & ADDRESS:                          | if necessary)  TITLE:  SECRETANDIVISION OF 98 OCT 2            |

#### GUEST INFORMANT, L.L.C. MANAGERS' LIST

NAME **BUSINESS ADDRESS** 

21200 Erwin Street David L. Hauser

Woodland Hills, CA 91367

Silvia Kessel c/o Metromedia Company

215 East 67th Street New York, NY 10021

c/o Metromedia Company 215 East 67<sup>th</sup> Street John W. Kluge

New York, NY 10021

Stuart Subotnick

c/o Metromedia Company 215 East 67<sup>th</sup> Street New York, NY 10021

c/o Metromedia Company Arnoid L. Wadler

1 Meadowlands Plaza East Rutherford, NJ 07073

# State of Delaware

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Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GUEST INFORMANT, L.L.C." 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 SIXTEENTH DAY OF SEPTEMBER, A.D. 1998.

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

DIVISION OF CCRPORATIONS

98 OCT 21 PM 1:56

2773221 8300 981358801



EdwH. Dul 09-16-98

Edward J. Freel, Secretary of State

AUTHENTICATION:

DATE:

## 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 Limited Liability Company is:  |            |                                |
|---|------------|--------------------------------|
| GUEST INFORMANT, L.L.C.   |            | -                              |
| 2. The name and 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  City/State/Zip   | 98 OCT 21  | DIVISION                       |
| Having been named as registered agent and to accept service of process for the above stated liminability company at the place designated in this certificate, I hereby accept the appointment as a agent and agree to act in this capacity. I further agree to comply with the provisions of all staturelating to the proper and complete performance of my duties, and I am familiar with and accept obligations of my position as registered agent. | registered | FILED STATE<br>OF CORPORATIONS |

Filing Fee: \$ 35 for Designation of Registered Agent

Cassandra Antonetz (Signature) Vice President

# AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

| GUEST INFORMANT, L.L.C. certifies:   |                     | _              |                     |
|--|---------------------|----------------|---------------------|
| 1) the above named limited liability company has at least one member;  |                     |                |                     |
| 2) the total amount of cash contributed by the member(s) is  | \$ 26,428,64        | <u>12</u> ;    |                     |
| 3) if any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto.) and  | \$                  | <u>0</u> ;     |                     |
| 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is  (This total includes amounts from 2 and 3 above.)  | \$ <u>26,428,64</u> | 12             |                     |
| Signature of a member or an authorized representative of a member of a member of an authorized representative of a member of a | oer.                | 98 OCT 21 PH 1 | DIVISION OF CORPORE |
| ARNOLD L. WADLER, MANAGER  |                     | <u></u>        | ATE                 |
| Typed or printed name of signee  |                     | 9              | ₹s                  |

Filing Fee: \$250.00 for Application and Affidavit