

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

LIMITED LIABILITY
COMPANY
RESTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

01 NOV 20 PM 1:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M99000000600**

1. Limited Liability Company's Name

MEGA COMMUNICATIONS OF ST. PETERSBURG, LLC
1915 N. DALE MARY HWY STE. 200
Tampa FLA 33607

RECEIVED

OCT 30 2001

2. Principal Office Address

1915 N. Dale Mary
Suite, Apt. #, etc. **200**

3. Mailing Office Address

767 Fifth Ave
Suite, Apt. #, etc.

City & State

Tampa FL
Zip **33607**

City & State

NYC NY
Zip **10153**

4. State/Country of Formation

5. Date Organized or Qualified To Do Business in Florida

6. FEI Number

22-3646110

Applied For

Not Applicable

CERTIFICATE OF STATUS DESIRED ☐

7. Name and Address of Current Registered Agent

Name **Corporation Service Co**

Street Address (P.O. Box Number is Not Acceptable)

1201 Haystack

Suite, Apt. #, Etc.

700004718207-9

-12/11/01--01006--024

*****150.00 ***150.00**

City

Tallahassee

State

FL

Zip Code

32301

8. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of

Registered Agent

Margaret M. O'Neil, authorized Rep.

REGISTERED AGENT MUST SIGN

Date

11/12/01

9. Name and Street Address of Managing Members/Managers

Title

Name of Managing Members/Managers

Street Address of Each Managing Member/Manager

City / State / Zip

ERAN SCHREIBER

767 Fifth Ave

St. Paul

NYC

NYC NY 10153

RESTATEMENT

of

dec

I certify that I am a managing member/manager of the company or duly empowered to execute this application as provided for in Chapter 608, F.S. I further certify that when this application is filed, the company has been organized in accordance with the requirements of section 608.001, F.S., and that all fees owed by the limited liability company have been paid. The information included in this application is true and accurate, and my signature shall have the same legal effect as a notary public.

Signature of

ERAN SCHREIBER

Date

10/16/01

Daytime Phone #

212 605-0800

Typed or printed name of signing Managing Member/Manager

ERAN SCHREIBER