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M99000001484

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**LIMITED LIABILITY
COMPANY
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M99000001484

1. Limited Liability Company's Name

WAITT BROADCASTING OF FLORIDA, L.L.C.

FILED
03 MAY 16 AM 9:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100019099431
01007 008 05/16/03 \$200.00

2. Principal Office Address

1125 S. 103RD ST.

Suite, Apt. #, etc.

200

City & State

OMAHA, NE

Zip

68124

Country

3. Mailing Office Address

1125 S. 103RD ST.

Suite, Apt. #, etc.

200

City & State

OMAHA, NE

Zip

68124

Country

4. State/Country of Formation
SOUTH DAKOTA

5. Date Organized or Qualified
To Do Business in Florida 09/22/99

6. FEI Number

47-0816765

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☒

8. Name and Address of Current Registered Agent

Name

CT CORPORATION SYSTEM

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

1200 SOUTH PINE ISLAND ROAD

Suite, Apt. #, Etc.

City

PLANTATION

State

FL

Zip Code

33324

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 606, F.S.

Signature of
Registered Agent

Christina M. Eastwing

Christina M. Eastwing
Assistant Secretary

Date 5/29/03

REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Member/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	WAITT, NORMAN W JR.	1125 S. 103RD ST., SUITE 200	OMAHA, NE 68124
MGR	SELNE, STEVEN W	1125 S. 103RD ST., SUITE 200	OMAHA, NE 68124
MGR	SCHUELB, JOHN S	1125 S. 103RD ST., SUITE 200	OMAHA, NE 68124

REINSTATEMENT 2002-2003
JK

11. I certify that I am managing membership or of the receiver or trustee empowered to execute this application as provided for in chapter 606, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 601.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of
Managing Member/Manager

Steven W. Selne

Date 5/12/03

Daytime Phone (402) 320-2520

Typed or printed name of signing Managing Member/Manager STEVEN W. SELNE

FL110-111302 CT System Online

MAY-28-2003 13:19

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