FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

100138364801
12/02/08--01009--008 **138.75

DOCUMENT # M99000001718

1. Limited Liability Company's Name
ACCENT MARKETING SERVICES, L.L.C.

CR2E041 (1/07)

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address MDC PARTNERS INC.
400 MISSOURI AVENUE	950 THIRD AVENUE
Suite, Apt. #, etc. SUITE 107	Suite, Apt. #, etc. 5TH FLOOR
City & State JEFFERSONVILLE, IN	City & State NEW YORK, NY
Zip 47130 Country USA	Zip 10022 Country USA

4. State/Country of Formation DELAWARE

5. Date Organized or Qualified To Do Business in this State 10/28/1999

6. FEI Number 61-1355595 ☐ Applied For ☐ Not Applicable

CERTIFICATE OF STATUS DESIRED ☐ $5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name NRAI SERVICES, INC.

Street Address (P.O. Box Number is Not Acceptable) 2731 Executive Park Drive

Suite, Apt. #, Etc. Suite 4

City WESTON State FL Zip Code 33331

☒ A $100 reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the $100 reinstatement be waived.

9. 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 Asst. Secretary Date 10/30/08
REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MANAGER	KEVIN FOLEY	400 MISSOURI AVE. STE 400	JEFFERSONVILLE, IN 47130
MGR	CHRIS DAUK	400 MISSOURI AVE. STE 400	JEFFERSONVILLE, IN 47130
MGR	MITCHELL GENDEL	950 THIRD AVE. 5TH FLOOR	NEW YORK, NY 10022
MGR	GAVIN SWARTZMAN	45 HAZELTON AVE.	TORONTO, ON CANADA M5R 2E3
MGR	ROBERT E. DICKSON	45 HAZELTON AVE.	TORONTO, ON CANADA M5R 2E3
MGR	GLENN GIBSON	45 HAZELTON AVE.	TORONTO, ON CANADA M5R 2E3

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, 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 608.408, 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 Date 10/30/2008 Daytime Phone # 862-206-6271

Typed or printed name of signing Managing Member/Manager CHRIS DAUK

REINSTATEMENT 2008