

PO5000061583

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

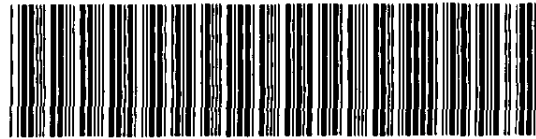
(Business Entity Name)

(Document Number)

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12/08/2010  
M. RIVERA  
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P05000061583

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## EIN OBTAINED

Form <b>SS-4</b> (Rev. July 2007) Department of the Treasury Internal Revenue Service	<b>Application for Employer Identification Number</b> (For use by employers, corporations, partnerships, trusts, estates, churches, government agencies, Indian tribal entities, certain individuals, and others.) <b>▶ See separate instructions for each line. ▶ Keep a copy for your records.</b>	OMB No. 1545-0003 EIN <b>27-1822635</b>
Type or print clearly.	1 Legal name of entity (or individual) for whom the EIN is being requested <b>IMedia Group, LLC</b>	
	2 Trade name of business (if different from name on line 1)	3 Executor, administrator, trustee, "care of" name
	4a Mailing address (room, apt., suite no. and street, or P.O. box) <b>1375 Gateway Blvd.</b>	5a Street address (if different) (Do not enter a P.O. box.)
	4b City, state, and ZIP code (if foreign, see instructions) <b>Boynton Beach, Florida 33426</b>	5b City, state, and ZIP code (if foreign, see instructions)
	6 County and state where principal business is located <b>Palm Beach, Florida</b>	
	7a Name of principal officer, general partner, grantor, owner, or trustor <b>Vernell Burris, Jr.</b>	7b SSN, ITIN, or EIN <b>326-50-1602</b>
8a Is this application for a limited liability company (LLC) (or a foreign equivalent)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		8b If 8a is "Yes," enter the number of LLC members <b>2</b>
8c If 8a is "Yes," was the LLC organized in the United States? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
9a <b>Type of entity</b> (check only one box). <b>Caution.</b> If 8a is "Yes," see the instructions for the correct box to check.		
<input type="checkbox"/> Sole proprietor (SSN) _____ <input checked="" type="checkbox"/> Partnership <input type="checkbox"/> Corporation (enter form number to be filed) ▶ _____ <input type="checkbox"/> Personal service corporation <input type="checkbox"/> Church or church-controlled organization <input type="checkbox"/> Other nonprofit organization (specify) ▶ _____ <input type="checkbox"/> Other (specify) ▶ _____		
<input type="checkbox"/> Estate (SSN of decedent) _____ <input type="checkbox"/> Plan administrator (TIN) _____ <input type="checkbox"/> Trust (TIN of grantor) _____ <input type="checkbox"/> National Guard <input type="checkbox"/> State/local government <input type="checkbox"/> Farmers' cooperative <input type="checkbox"/> Federal government/military <input type="checkbox"/> REMIC <input type="checkbox"/> Indian tribal governments/enterprises Group Exemption Number (GEN) if any ▶ _____		
9b If a corporation, name the state or foreign country (if applicable) where incorporated		State _____ Foreign country _____
10 <b>Reason for applying</b> (check only one box)		
<input checked="" type="checkbox"/> Started new business (specify type) ▶ <b>Advertising / Marketing</b> <input type="checkbox"/> Hired employees (Check the box and see line 13.) <input type="checkbox"/> Compliance with IRS withholding regulations <input type="checkbox"/> Other (specify) ▶ _____		
<input type="checkbox"/> Banking purpose (specify purpose) ▶ _____ <input type="checkbox"/> Changed type of organization (specify new type) ▶ _____ <input type="checkbox"/> Purchased going business <input type="checkbox"/> Created a trust (specify type) ▶ _____ <input type="checkbox"/> Created a pension plan (specify type) ▶ _____		
11 Date business started or acquired (month, day, year). See instructions. <b>02/02/2010</b>		12 Closing month of accounting year <b>December 31</b>
13 Highest number of employees expected in the next 12 months (enter -0- if none).		14 Do you expect your employment tax liability to be \$1,000 or less in a full calendar year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If you expect to pay \$4,000 or less in total wages in a full calendar year, you can mark "Yes.")
Agricultural <b>0</b> Household <b>0</b> Other <b>0</b>		
15 First date wages or annuities were paid (month, day, year). <b>Note.</b> If applicant is a withholding agent, enter date income will first be paid to nonresident alien (month, day, year) <b>N/A</b>		
16 Check <b>one</b> box that best describes the principal activity of your business.		
<input type="checkbox"/> Construction <input type="checkbox"/> Rental & leasing <input type="checkbox"/> Transportation & warehousing <input type="checkbox"/> Health care & social assistance <input type="checkbox"/> Wholesale-agent/broker <input type="checkbox"/> Real estate <input type="checkbox"/> Manufacturing <input type="checkbox"/> Finance & insurance <input type="checkbox"/> Accommodation & food service <input type="checkbox"/> Wholesale-other <input type="checkbox"/> Retail <input checked="" type="checkbox"/> Other (specify) <b>Advertising / Marketing</b>		
17 Indicate principal line of merchandise sold, specific construction work done, products produced, or services provided. <b>A full service Marketing &amp; Advertising firm.</b>		
18 Has the applicant entity shown on line 1 ever applied for and received an EIN? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," write previous EIN here ▶		
Third Party Designee	Complete this section only if you want to authorize the named individual to receive the entity's EIN and answer questions about the completion of this form.	
	Designee's name <b>Jacob Varghese</b> Address and ZIP code <b>7083 Hollywood Blvd., Ste. 180, Los Angeles, CA 90028</b>	Designee's telephone number (include area code) <b>(323) 962-8600 x 529</b> Designee's fax number (include area code) <b>(323) 790-1991</b>
Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, it is true, correct, and complete.		Applicant's telephone number (include area code)
Name and title (type or print clearly) ▶ <b>Vernell Burris, Jr., Member</b>		<b>(561) 414-8821</b>
Signature ▶		Applicant's fax number (include area code)
Date ▶		



DEPARTMENT OF THE TREASURY  
INTERNAL REVENUE SERVICE  
CINCINNATI OH 45999-0023

Date of this notice: 02-03-2010

Employer Identification Number:  
27-1822635

Form: SS-4

Number of this notice: CP 575 B

IMEDIA GROUP LLC  
VERNELL BURRIS JR MBR  
1375 GATEWAY BLVD  
BOYNTON BEACH, FL 33426

For assistance you may call us at:  
1-800-829-4933

IF YOU WRITE, ATTACH THE  
STUB AT THE END OF THIS NOTICE.

#### WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 27-1822635. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 1065

04/15/2011

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, *Accounting Periods and Methods*.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, *Entity Classification Election*. See Form 8832 and its instructions for additional information.

A limited liability company (LLC) may file Form 8832, *Entity Classification Election*, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, *Election by a Small Business Corporation*. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at [www.irs.gov](http://www.irs.gov). If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

02-03-2010 IMED B 9999999999 SS-4

- \* Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you.
- \* Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- \* Refer to this EIN on your tax-related correspondence and documents.

Keep this part for your records. CP 575 B (Rev. 7-2007)

999999999999

IMEDIA GROUP LLC  
VERNELL BURRIS JR MBR  
1375 GATEWAY BLVD  
BOYNTON BEACH, FL 33426

**Malave, Erin**

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**From:** Vernell Burris Jr [vburrisjr@gmail.com]  
**Sent:** Monday, December 06, 2010 2:29 PM  
**To:** CorpAddressChange  
**Subject:** EIN Change iMedia Group, LLC  
**Attachments:** iMedia Group, LLC\_NEWSS4.pdf; iMedia Group, LLCEIN1-7483289.pdf

Greetings,

The attached documents reflects the new EIN number for iMedia Group, LLC is; 27-1822635.

If you have any questions please contact me directly.

Regards,

Vernell Burris, Jr.  
Boynton Beach, FL 33435  
Telephone: 561.414.8821  
eMail: [vburrisjr@gmail.com](mailto:vburrisjr@gmail.com)  
Google Talk vburrisjr | AIM vburris | YIM vburrisjr | Facebook

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