

P11000061444Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000173126 3)))



H110001731263ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
TTB Media Corporation

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

*07/06/11*RECEIVED
11 JUL -5 AM 10:44
DIVISION OF CORPORATIONSFILED
11 JUL -5 PM 2:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: TTB Media Corporation

ARTICLE II PRINCIPAL OFFICE

Principal street address
Lindemann Capital Partners Corporation
c/o Eran Schreiber, 375 Park Ave
Suite 2603 New York, NY 10152

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of this corporation is for the operation of broadcast stations.

ARTICLE IV SHARES

The number of shares of stock is: Class A (voting/100 shares, no par value); Class B (non voting/100 shares, no par value)

ARTICLE V INTIAL OFFICERS AND/OR DIRECTORS

Name and Title: Eran Schreiber, President
Address: Lindemann Capital Partners Corporation
375 Park Ave, Suite 2603
New York, NY 10152

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: CT Corporation System
Address: 1200 South Pine Island Road
Plantation, Florida 33324

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Aaliyah Castro, Paralegal
Address: c/o Drinker Biddle & Reath LLP
One Logan Sq., Suite 2000, Phila., PA 19103

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity
CT Corporation System

By:

Connie B...

Required Signature/Registered Agent

7/1/11
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Aaliyah Castro

Required Signature/Incorporator

7/1/11
Date

FILED
11 JUL -5 PM 2:36
TALLAHASSEE, FLORIDA
DEPARTMENT OF STATE