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Profit	Amendment		
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Fictitious Name	Foreign		•
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Examiner's Initials

CR2E031(1/95)



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

January 26, 1998

LOUIS W FOXWELL 4274 KING RICHARD LANE SARASOTA, FL 34232

SUBJECT: SARASOTA JOURNAL, INC.

Ref. Number: W98000001751



We have received your document for SARASOTA JOURNAL, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the corporation's principal office and/or a mailing address in the document.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.)

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6904.

Freida Chesser Corporate Specialist

Letter Number: 198A00004190

CERTIFICATE OF INCORPORATION

THE UNDERSIGNED, being over the age of eighteen years, in order to form a corporation pursuant to the pro-Corporate Code, hereby certifies as follows: **FIRST IDENTIFICATION** The name of the corporation, hereinafter referred to as the "Corporation," is SECOND PERIOD OF EXISTENCE The period during which the corporation shall continue is perpetual. THIRD REGISTERED OFFICE AND REGISTERED AGENT The address of the initial registered office of the Corporation is 4274 King Richard Lar San Fl. 342 and the name and address (if different) of the initial registered agent therein and in charge thereof, upon whom process against the Corporation may be served, is **FOURTH PURPOSE** The purpose of the Corporation is to engage in any or all lawful business for which corporations may be organized under the provisions of the General Corporation Law of Delaware. FIFTH SHARES 1,000 (one thousand) shares having a The total authorized capital stock of the Corporation is (DNE hundred dillars) EQ All or any part of said shares may be issued by the Corporation from time to time and for such consideration as may be determined upon or fixed by the Board of Directors, as provided by law. SIXTH INCORPORATOR'S ADDRESS The name and post office address of the Incorporator of the Corporation is as follows:

SEVENTH DIRECTORS

The powers of the incorporator are to terminate upon the filing of this Certificate of Incorporation and the name(s) and mailing addresses of persons who are to serve as director(s) until the first meeting of stockholders or until their successors are elected and qualify are as follows:

Ruth Farris 291 ha Costa St. Nakonis, Fl. 33555 Thomas Foxwell Parks Rd. Chester, Md. 21666 Loy18 W. Foxwell 4274 Ring Richard ha. San. Fl. 34234

EIGHTH INDEMNITY

Directors of the corporation shall not be liable to either the corporation or its stockholders for monetary damages for a breach of fiduciary duties unless the breach is one which invokes: (1) a director's duty of loyalty to the corporation or its stockholders; (2) acts or omissions not in good faith or which involve intentional misconduct or a knowing violation of law; (3) liability for unlawful payments of dividends or unlawful stock purchases or redemption by the corporation; or (4) a transaction from which the director derived an improper personal benefit.

The effective date of this Certificate of Incorporation shall be \(\sqrt{anuary} \) 18 1998

IN WITNESS WHEREOF, the undersigned Incorporator has caused this Certificate of Incorporation to be executed as of

January 18, 1998

(Incorporator)

LOUIS W. FXXWell

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1,	The name of the corporation is: Sarahota Journ	al,	ti	<u>u</u> c
-	<u> </u>			-
2.	The name and address of the registered agent and office is:			
	Louis W. Pox well	T _V	9	
	4274 King Richard Lane	CRETA	JAN 2	TI
	(P.O. Box NOT acceptable)	RY OF	9 44	
	(City/State/Zip)	FLORID	9: 04	-

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

SIGNATURE

DATE