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File Number \_\_\_\_\_\_5668-916-8



Eugene "Gene" Moore Fee: \$34.00 Cook County Recorder of Deeds Date: 01/04/2005 01:17 PM Pg: 1 of 6

PREMIER MEDIA PRODUCTIONS, INC.

INCORPORATED UNDER THE LAWS OF THE STATE OF ILLINOIS HAVE BEEN FILED IN THE OFFICE OF THE SECRETARY OF STATE AS PROVIDED BY THE BUSINESS CORPORATION ACT OF ILLINOIS, IN FORCE JULY 1, A.D. 1984.

Now Therefore, I, George H. Ryan, Secretary of State of the State of Illinois, by virtue of the powers vested in me by law, do hereby issue this certificate and attach hereto a copy of the Application of the aforesaid corporation.

In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Scal of the State of Alinois,



at the o	dy of Frangz	field, this 23RD
dan of	JANUARY	$\mathcal{A}.\mathcal{D}.$ 1992 and
- 1		
	,	sa Maria Cha
of the I	ndefrendence (	of the United States

George & Ryan SECPETARY OF STATE

 $\alpha$ 

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De Sp	ecretary of State epartment of Bu pringfield, IL 62 dephone (217)	isiness Services 2756	FILED	PAID.  JAN 2 3 1392	SUBMIT IN DUPLICATION This space for use Secrylary of State
ch: ne mo	eck, cashiers ( y's check, Illino	made by certilizheck, Illinois att is C.P.A's check vable to "Secreta	OF SECRETARY	Da Fil	anchise Tax S 2 ing Fee S proved:
1.	CORPOR	ATE NAME:	Premiere Med	ia Productions, Inc.	
,	(The corporat	e name must cont	ain the word "corporation", "company," "In	corporated," "limited" or an abbrev	iation thereof.)
2.	Initial Regi	stered Agent:	Jules	M.	Laser
	initial Regis	stered Office:	First Name 30 North LaSalle Street		Last name 2500
		<b>'</b> •	Chicaço  Ciy	Street 60602 Zip Code	Suite # Cook
					County
3.	The	conduct of	thich the composation is organized: his point, add one or more sheets of this si any or all lawful busines he Illinois Business Com	ses for which a com	poration may be
	•		· .	Clark	
4.	Paragraph 1	: Authorized Si	hares, Issued Shares and Conside		
<del>-</del>	Class	Par Value per Share	Number of Shares Authorized	Number of Sharer Proposed to be Issue	
	Common	s None	10,000	1,900	\$ 100.00
					CTAL \$100.00

(over)

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	(a) Number of directors constituting the initial board of directors of the corporation:  (b) Names and addresses of the persons who are to serve as directors until the first annual meeting shareholders or until their successors are elected and qualify:					
	Name Residential Address					
			·			
6. OPTIONAL:	(a) It is estimated that				•	
	corporation for the following year wherever located will be: \$					
		is during the following		·		
	(c) It is estimated th					
		corporation during that the gross amount				
		at the gross amount places of business in t				
	tie following year		•	s	· · · · · · · · · · · · · · · · · · ·	
7. OPTIONAL:	OTHER &FOVISION	ic .				
T. OF HOIVAL	Attach a separate sh		any other provisio	s to be included	in the Anicles of	
	Incorporation, e.c., as	uthorizina preemptive	e rights, denving cu	mulative voting.	regulating internal	
	affairs, voting majority					
				<del></del>		
8.	NAME(S) (	& ADDRESS(ES) (	OF INCORPORA	rofi(s)		
Articles of Incorp	ned incorporator(s) here poration are true.	(			•	
Dated1	anuary 17	, 19 9(	•			
	Signature and Nan		14	Addres	s	
1	E To-Car		% 30 N. L		Suite 2500	
Signature			Street			
_Bruce E	ו ומגו					
(Type or F	int Name)		Ctic go	IL Stare		
(Type or F	rint Name)		Cr 1C 20 Sity/To an	IL State	60602 Zip Ca	
(Type or F	Pini Name)		CF 1C: go Sty/To an 2			
(Type or F 2. Signature	rini Name)		2. Street	State	Zip Ca	
(Type or F 2. Signature	nnt Name)		Sity/To An 2.		Zip Ca	
2. Signature  (Type or P	rini Name)		2. Street City/Town	State	Zip Ca	
(Type or F 2. Signature (Type or P 3. Signature	nnt Name)		City/Town 3. Street	State  State	Zip Co Zip Co	
2. Signature  (Type or P  3. Signature	innt Name)	Carbon copy, photocopy	City/Town 3. Street City/Town	State  State  State  State	Zip Co Zip Co Zip Go	
(Type or F 2. Signature  (Type or F 3. Signature  (Type or F (Signatures must be NOTE: If a corpora	rint Name)  int Name)  in ink on original document, alio vacts as incorporator,	, the name of the corpor	City/Town 3. Street  City/Town or rubber stamp signaturation and the state of	State  State  State  State  ses may only be used incorporation shall	Zip Co Zip Co an conformed copies.) be shown and the execu-	
(Type or F 2. Signature  (Type or F 3. Signature  (Type or F (Signatures must be NOTE: If a corpora	innt Name)  innt Name)  innt Name)  in ink on original document,	, the name of the corpor	City/Town 3. Street  City/Town or rubber stamp signaturation and the state of	State  State  State  State  ses may only be used incorporation shall	Zip Co Zip Co Zip Co an conformed copies.) be shown and the execu	
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3. Signature  (Type or P  (Type or P  (Signatures must be NOTE: If a corpora shall be by its Pres	rint Name)  int Name)  in ink on original document, alio vacts as incorporator,	the name of the corpor and verified by him, and FEE SC the rate of 15/100 of 1 g	City/Town 3. Street  City/Town or rubber stamp signaturation and the state of attested by its Secret CHEDULE Secret (\$1.50 per \$1.	State  St	Zip Co Zip Co morpholographic copies.) be shown and the executoretary.	
3. Signature  (Type or P  (Type or P  (Signatures must be NOTE: If a corpora shall be by its Pres	innt Name) innt Name) in ink on original document, alio vacts as incorporator, sir at or Vice President a minimum of \$25 and a minimum	the name of the corpor and verified by him, and FEE SC the rate of 15/100 of 1 g	City/Town 3. Street  City/Town or rubber stamp signaturation and the state of attested by its Secret CHEDULE Secret (\$1.50 per \$1.	State  St	Zip Co. Zip Co. mn roalarmed copies.) be shown and the executoretary.	
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FORM BCA 5.10/5.20 (rev. Dec. 2003) STATEMENT OF CHANGE OF **REGISTERED AGENT AND/OR** REGISTERED OFFICE **Business Corporation Act** Jesse White, Secretary of State Department of Business Services DEPARTIMENT OF Springfield, IL 62756 BUSINESS SERVICES Telephone (217) 782-3647 JEBSE WHITE SECRETARY OF S www.cyberdriveillinois.com Remit payment in the form of a check or moriey order payable to the Secretary of State. Filing Fee: \$25.00 sub nit in duplicate CORPORATE NAME Premiere Media Productions, Inc. STATE OR COUNTRY OF INCORPORATION: Illinois 2. Name and address of the registered agent and registered office as they appear on the records of the office 3. of the Secretary of State (before (nange): Zweiban S. Registered Agent Neil Last Name Middle Name First Name Registered Office 2866 Whispering Oaks Dr. Suite No. (A P.O. Box alone is not acceptable) Number Street 60089 Lake **Buffalo Grove** County ZIP Code City Name and address of the registered agent and registered riffice shall be (after all changes herein reported): Rubin Marcia Registered Agent Last Name Middle Name First Name Registered Office 6511 N. Longmeadow Suite No. ( F.O Box alone is not acceptable) Street Number Cook Lincolnwood 60046 ZIP Code County City The address of the registered office and the address of the business office of the registered agent, as changed, The above change was author ized by: ("X" one box only) a. 
 By resolution duly adopted by the board of dir ectors. (Note 5) b.  $\square$  By action of the registered agent. (Note 6)

SEE REVERSE SIDE FOR SIGNATURES(S).

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<ol><li>(If authorized by the board of directors, sign I</li></ol>	here. See Note 5)
The undersigned corporation has caused this s	statement to be signed by a duly authorized officer who affirms,
under penalties of perjury, that the facts stated her	Co
Dated October 27 200)	Premiere Media Productions, Inc.
Month & Day) (Yea	r) (Exact Name of Corporation)
Marin Ral	<u> </u>
(Any Authorized Officer's Signature)	
Marcia Rubin - President	<del></del>
(Type or Print Name and Title)	
(If change of registered office by registered agent, The analysis gned, under penalties of perjury,	sign here. See Note 6) affirms that the facts stated herein are true.
Dated (Month & Day) (Yes	ar) (Signature of Registered Agent of Record)
Q <sub>f</sub> x	
	(Type or print name. If the registered agent is a corporation, type
	or print the name and title of the officer who is signing on its
$O_{\mathcal{F}}$	behalf \

#### NOTES

- The registered office may, but need not be the same as the principal office of the corporation. However, the
  registered office and the office address of the registered agent must be the same.
- 2. The registered office must include a street or road audress; a post office box number alone is not acceptable.
- 3. A corporation cannot act as its own registered agent.
- 4. If the registered office is changed from one county to another, then the corporation must file with the recorder of deeds of the new county a certified copy of the articles of incorporation and a certified copy of the statement of change of registered office. Such certified copies may be obtained ONLY from the Secretary of State.
- 5. Any change of registered agent must be by resolution adopted by the board of directors. This statement must then be signed by a duly author ized officer.
- 6. The registered agent may report a change of the registered office of the corpo ation for which he or she is registered agent. When the agent reports such a change, this statement must be signed by the registered agent. If a corporation is acting as the registered agent, a duly authorized officer of such corporation must sign this statement.

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STATE OF ILLINOIS

O FIGE OF THE SECRETARY OF STATE hereby care Withat this is a true and correct copy. consisting :-- 2 ... pages, as taken from the original on file in this office.

JESSE WHITE JESSE WHITE SECRETARY OF STATE

Jert's Office