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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

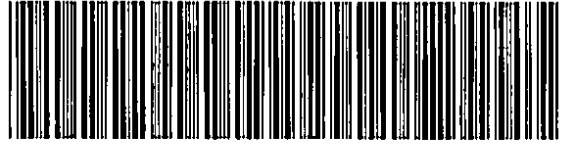
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ION Station Equipment, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

ATTN: Legal/Claudine Guercio

Name of Person

ION Media Networks, Inc.

Firm/Company

601 Clearwater Park Road

Address

West Palm Beach, FL 33401

City/State and Zip Code

CorporateRecords@ionmedia.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Claudine Guercio	561	682-4489
_____	at (____)	_____
Name of Contact Person	Area Code	Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$125.00 Filing Fee
 \$130.00 Filing Fee & Certificate of Status
 \$155.00 Filing Fee & Certified Copy
 \$160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. ION Station Equipment, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 84-3336694

(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 601 Clearwater Park Road

(Street Address of Principal Office)

6. 601 Clearwater Park Road

(Mailing Address)

West Palm Beach, FL 33401

Attn: Legal Dept

West Palm Beach, FL 33401

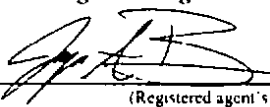
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Jayne Berger

Office Address: 601 Clearwater Park Road

West Palm Beach _____, Florida 33401
(City) (Zip code)

Registered agent's acceptance:
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: Manager **Name and Address:**
 Name: R Brandon Burgess
 Address: 601 Clearwater Park Road
West Palm Beach, FL 33401
 Person _____
 Other _____ Other _____

Title or Capacity: Manager **Name and Address:**
 Name: ION Media Stations, Inc.
 Address: 601 Clearwater Park Road
West Palm Beach, FL 33401
 Person _____
 Other _____ Other _____

Manager **Name and Address:**
 Name: David Christman
 Address: 810 7th Avenue
31st Floor
 Authorized
 Person New York, NY 10019
 Other _____ Other _____

Manager **Name and Address:**
 Name: _____
 Address: _____
 Authorized
 Person _____
 Other _____ Other _____

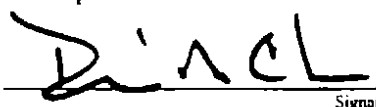
Manager **Name and Address:**
 Name: _____
 Address: _____
 Authorized
 Person _____
 Other _____ Other _____

Manager **Name and Address:**
 Name: _____
 Address: _____
 Authorized
 Person _____
 Other _____ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.


 Signature of an authorized person

David Christman
 Typed or printed name of signee

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ION STATION EQUIPMENT, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF AUGUST, A.D. 2020.

2020/08/04 PM 3:10




Jeffrey W. Bullock, Secretary of State

7646175 8300

SR# 20206425370

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203402219

Date: 08-04-20