

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000001473

Entity Name: COX MEDIA, L.L.C.

Current Principal Place of Business:

6205-B PEACHTREE DUNWOODY ROAD
ATLANTA, GA 30328

Current Mailing Address:

6205-A PEACHTREE DUNWOODY ROAD
ATLANTA, GA 30328 US

FEI Number: 58-1444671

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title PRESIDENT, DIRECTOR, MANAGER
Name ESSER, PATRICK J
Address 6205-B PEACHTREE DUNWOODY
 ROAD
City-State-Zip: ATLANTA GA 30328

Title VP
Name VICKERS, MARY A.
Address 6205-B PEACHTREE DUNWOODY
 ROAD
City-State-Zip: ATLANTA GA 30328

Title DIRECTOR, SECRETARY, MANAGER
Name HIGHTOWER, JENNIFER
Address 6205-B PEACHTREE DUNWOODY
 ROAD
City-State-Zip: ATLANTA GA 30328

Title DIRECTOR, VP, MANAGER
Name MCBRIDE, R. PERLEY
Address 6205-B PEACHTREE DUNWOODY
 ROAD
City-State-Zip: ATLANTA GA 30328

Title MEMBER
Name COX LAHC, INC.
Address 6205-B PEACHTREE DUNWOODY
 ROAD
City-State-Zip: ATLANTA GA 30328

Title VP, TREASURER
Name FRIEDMAN, MARIA L.
Address 6205-B PEACHTREE DUNWOODY
 ROAD
City-State-Zip: ATLANTA GA 30328

Title ASST. SECRETARY
Name AVILA, LUIS A.
Address 6205-B PEACHTREE DUNWOODY
 ROAD
City-State-Zip: ATLANTA GA 30328

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LUIS A. AVILA

ASST. SECRETARY

04/21/2021

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date