

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000001473

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

Current Principal Place of Business:

6205 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

FILED
Apr 26, 2023
Secretary of State
9022232752CC

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 GREATREX, MARK J.
Address 6205 PEACHTREE DUNWOODY ROAD

City-State-Zip: ATLANTA GA 30328

Title VICE PRESIDENT
Name SIEGEL, REBECCA L.
Address 6205 PEACHTREE DUNWOODY ROAD

City-State-Zip: ATLANTA GA 30328

Title SECRETARY, DIRECTOR, MANAGER
Name HIGHTOWER, JENNIFER
Address 6205 PEACHTREE DUNWOODY ROAD

City-State-Zip: ATLANTA GA 30328

Title VICE PRESIDENT, DIRECTOR,
MANAGER
Name MCBRIDE, R. PERLEY
Address 6205 PEACHTREE DUNWOODY ROAD

City-State-Zip: ATLANTA GA 30328

Title MEMBER
Name COX LAHC, INC.
Address 6205 PEACHTREE DUNWOODY ROAD

City-State-Zip: ATLANTA GA 30328

Title VICE PRESIDENT, TREASURER
Name FRIEDMAN, MARIA L.
Address 6205 PEACHTREE DUNWOODY ROAD

City-State-Zip: ATLANTA GA 30328

Title ASSISTANT SECRETARY
Name AVILA, LUIS A.
Address 6205 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

ASSISTANT SECRETARY 04/26/2023

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date