

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000008423

Entity Name: UNIVISION FANTASY SPORTS, LLC**Current Principal Place of Business:**8551 NW 30TH TERRACE
MIAMI, FL 33122**Current Mailing Address:**8551 NW 30TH TERRACE
MIAMI, FL 33122 US**FEI Number:** 47-2501926**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 MEMBER
Name UNIVISION INTERACTIVE MEDIA, INC.
Address 8551 NW 30TH TERRACE
City-State-Zip: MIAMI FL 33122

Title PRESIDENT
Name SADUSKY, VINCENT
Address 8551 NW 30TH TERRACE
City-State-Zip: MIAMI FL 33122

Title CEO
Name SADUSKY, VINCENT
Address 8551 NW 30TH TERRACE
City-State-Zip: MIAMI FL 33122

Title CHIEF ACCOUNTING OFFICER
Name LORI, PETER H.
Address 8551 NW 30TH TERRACE
City-State-Zip: MIAMI FL 33122

Title SECRETARY
Name SCHWARTZ, JONATHAN
Address 8551 NW 30TH TERRACE
City-State-Zip: MIAMI FL 33122

Title GENERAL COUNSEL & HEAD OF
GOVERNMENT RELATIONS
Name SCHWARTZ, JONATHAN
Address 8551 NW 30TH TERRACE
City-State-Zip: MIAMI FL 33122

Title CHIEF TAX OFFICER
Name MCCANN, SHAWN
Address 8551 NW 30TH TERRACE
City-State-Zip: MIAMI FL 33122

Title TREASURER
Name MCCANN, SHAWN
Address 8551 NW 30TH TERRACE
City-State-Zip: MIAMI FL 33122

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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: UNIVISION INTERACTIVE MEDIA, INC.

MEMBER

05/24/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title CHIEF HUMAN RESOURCES OFFICER
Name LAZO, MARGARET
Address 8551 NW 30TH TERRACE
City-State-Zip: MIAMI FL 33122

Title CFO
Name LORI, PETER H.
Address 8551 NW 30TH TERRACE
City-State-Zip: MIAMI FL 33122

Title ASST. SECRETARY
Name ACEVES, JOHN PAUL
Address 8551 NW 30TH TERRACE
City-State-Zip: MIAMI FL 33122

Title EXEC. VICE PRESIDENT
Name MCCANN, SHAWN
Address 8551 NW 30TH TERRACE
City-State-Zip: MIAMI FL 33122

Title DIRECTOR
Name SCHWARTZ, JONATHAN
Address 8551 NW 30TH TERRACE
City-State-Zip: MIAMI FL 33122

Title DIRECTOR
Name LORI, PETER H.
Address 8551 NW 30TH TERRACE
City-State-Zip: MIAMI FL 33122

Title EXEC. VICE PRESIDENT
Name LAZO, MARGARET
Address 8551 NW 30TH TERRACE
City-State-Zip: MIAMI FL 33122

Title ASST. SECRETARY
Name MERCEDES, RAMON
Address 8551 NW 30TH TERRACE
City-State-Zip: MIAMI FL 33122

Title ASST. SECRETARY
Name GRANT, JAY R.
Address 8551 NW 30TH TERRACE
City-State-Zip: MIAMI FL 33122

Title EXEC. VICE PRESIDENT
Name SCHWARTZ, JONATHAN
Address 8551 NW 30TH TERRACE
City-State-Zip: MIAMI FL 33122

Title EXEC. VICE PRESIDENT
Name LORI, PETER H.
Address 8551 NW 30TH TERRACE
City-State-Zip: MIAMI FL 33122