

**2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M98000001011

**Entity Name:** AMC NETWORKS LATIN AMERICA LLC

**Current Principal Place of Business:**

2020 PONCE DE LEON BLVD  
8TH FLOOR  
CORAL GABLES, FL 33134

**FILED**  
**Jun 26, 2020**  
**Secretary of State**  
**8938595137CC**

**Current Mailing Address:**

2020 PONCE DE LEON BLVD  
8TH FLOOR  
CORAL GABLES, FL 33134 US

**FEI Number: 95-4694430**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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:** JOHN SHARP

06/26/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MBR  
Name AMC NETWORKS MOVIECO INC.  
Address 2020 PONCE DE LEON BLVD  
8TH FLOOR  
City-State-Zip: CORAL GABLES FL 33143

Title CEO  
Name ZULUETA, EDUARDO  
Address C/SATURNO 1  
POZUELO DE ALARCON  
City-State-Zip: MADRID 28224

Title COO  
Name CARROLL, EDWARD  
Address 11 PENN PLAZA  
City-State-Zip: NEW YORK NY 10001

Title EVP  
Name GALLAGHER, JAMES  
Address 11 PENN PLAZA  
City-State-Zip: NEW YORK NY 10001

Title EVP - CHIEF FINANCIAL OFFICER  
Name SULLIVAN, SEAN  
Address 11 PENN PLAZA  
City-State-Zip: NEW YORK NY 10001

Title GENERAL COUNSEL, AMC NETWORKS INTERNATIONAL  
Name ANDREE WILTENS, RUTGER  
Address 111 SALUSBURY ROAD  
City-State-Zip: LONDON NW6 6RG

Title CFO  
Name DEBEN, RICARDO  
Address 2020 PONCE DE LEON BLVD  
8TH FLOOR  
City-State-Zip: CORAL GABLES FL 33134

Title EVP - FINANCE  
Name BROHEL, JOHN  
Address 11 PENN PLAZA  
City-State-Zip: NEW YORK NY 10001

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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:** SAL FOCELLA

SENIOR VP - TAX

06/26/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date

**Authorized Person(s) Detail Continued :**

Title EVP - CORPORATE DEVELOPMENT AND  
TREASURER  
Name HSU, JOHN  
Address 11 PENN PLAZA  
City-State-Zip: NEW YORK NY 10001

Title SECRETARY  
Name KELLY, ANNE  
Address 11 PENN PLAZA  
City-State-Zip: NEW YORK NY 10001

Title VP - CONTROLLER  
Name STANFORD, CHRISTOPHER  
Address 11 PENN PLAZA  
City-State-Zip: NEW YORK NY 10001

Title SENIOR VP - TAX  
Name FOCELLA, SAL  
Address 11 PENN PLAZA  
City-State-Zip: NEW YORK NY 10001

Title FINANCE DIRECTOR  
Name HUFF, JOHN  
Address 2020 PONCE DE LEON BLVD  
8TH FLOOR  
City-State-Zip: CORAL GABLES FL 33134