

### *Certificate of Franchise Authority*

I certify that Gruv TV a Division of M3X Media, Inc., identification number CV08-0022, issued on 9/10/2008, is hereby granted authority to provide cable and/or video service in the following service area(s):

State of Florida

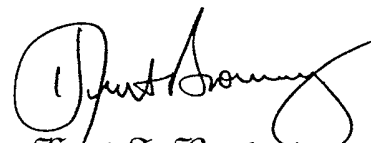
I further certify that authority to construct, maintain, and operate facilities through, upon, over, and under any public right-of-way or waters, subject to the applicable governmental permitting or authorization from the Board of Trustees of the Internal Improvement Trust Fund, is hereby granted.

This grant of authority is subject to lawful operation of the cable or video service by the applicant or its successor in interest.

Given under my hand and the Great Seal of the State of Florida, at Tallahassee, the Capitol, this the Tenth day of September, 2008



CR2EO22 (01-07)

  
Kurt S. Browning  
Secretary of State



**FLORIDA DEPARTMENT of STATE**

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CABLE AND/OR VIDEO  
FRANCHISING  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**APPLICATION FOR A STATE-ISSUED CERTIFICATE OF FRANCHISE AUTHORITY  
TO PROVIDE CABLE AND/OR VIDEO SERVICE**

- A. Official name of the cable or video service provider:  
Gruv TV a Division M3X Media, Inc.  
\_\_\_\_\_  
\_\_\_\_\_
- B. Street address of the principal place of business of the cable and/or video service provider:  
477 S. Rosemary Ave.  
Suite 208  
West Palm Beach, Florida 33401
- C. Federal employer identification number or the Department of State's document number:  
870785153
- D. Name, address, and business telephone number of an officer, partner, owner, member, or manager as a contact person for the cable or video service provider to whom questions or concerns may be addressed:  
  
Name: Jim Devericks  
Title: Chairman/CEO  
Address: 3500 Amber Jack Rd.  
Lantana, Florida  
Business telephone number: 561-514-0084 or 646-308-1730
- E. Duly executed affidavit attached (notarized and signed by an officer, partner, owner or managing member).

This application and affidavit must be submitted with an application fee of \$10,000.00 and an accompanying fee of \$35.00 and mailed to the State-Issued Certificate of Franchise Authority for Cable and/or Video Service at the following address:

**MAILING ADDRESS:**

Cable and/or Video Franchising  
Division of Corporations  
PO Box 5678  
Tallahassee, Florida 32314

**STREET ADDRESS:**

Cable and/or Video Franchising  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**E. (State- Issued Cable Franchise)**

STATE OF Florida  
COUNTY OF Palm Beach

**AFFIDAVIT**

I, James Devericks, am employed with M3X Media, Inc. in an official capacity as (officer, partner, owner, managing member) Chairman/CEO and do hereby attest to the facts stated herein from my personal knowledge. I hereby swear and affirm that the following statements are true and correct:

- 1) The applicant is fully qualified under the provisions of Chapter 610, F.S., to file this application and affidavit for a certificate of franchise authority.
- 2) The applicant has filed or will timely file with the Federal Communications Commission all forms required by that agency in advance of offering cable or video services in this state.
- 3) The applicant agrees to comply with all applicable federal and state laws and regulations, to the extent such state laws and rules are not in conflict with or superseded by the provisions of Chapter 610, F.S., or other applicable state law.
- 4) The applicant agrees to comply with all the state laws and rules and municipal and county ordinances and regulations regarding the placement and maintenance of communications facilities in the public rights-of-way that are generally applicable to providers of communications services in accordance with s. 337.401, F.S.
- 5) The description of the service area consistent with s. 610.104 (2)(e) 5a & b, F.S., for which the applicant seeks a certificate of franchise authority is:

State of Florida

6) Applicant's principal place of business: 477 S. Rosemary Ave. Suite 208 West Palm Beach Florida 33401

Names of the applicant's principal executive officers: Julian Shapiro, Ainsworth Spence, Nick Maria, Brett Hurd and Jay F. Salts III

Street Address sufficient for purposes of Chapter 48, F.S.: 477 S. Rosemary Ave. Suite 208 West Palm Beach, Florida 33401

- 7) The applicant will file with the Department of State a notice of commencement of services within five business days after first providing services in each area described.
- 8) The applicant will notify the Department of State of any changes of address or contact person.
- 9) The applicant's systems shall comply with the Federal Communications Commission's rules and regulations of the Emergency Alert System.

JAMES K. DEVERICKS  
Printed Name and Title

James K. Devericks  
Signature

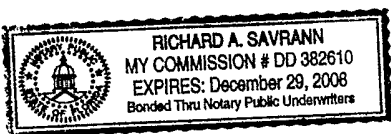
Sworn to affirm and subscribe before me on this 25<sup>TH</sup> day of August, 2008, by JAMES K. DEVERICKS  
☒ Personally known OR ☐ Produced Identification (Name of Affiant)

Type of Identification Produced: \_\_\_\_\_

Richard A. Savrann 12-29-08  
Name of Notary Public and Commission Expiration Date

Notary Public In and For the State of FLORIDA  
CF02 (7/07)

Richard A. Savrann  
Signature



(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP      ☐ WAIT      ☐ MAIL

(Business Entity Name)

(Document Number)

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