

F15000001332

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

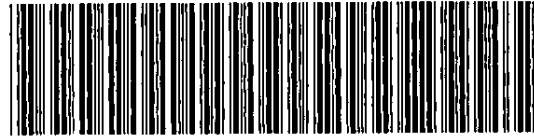
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATE
15 MAR 30 AM 10:45
NOT RECORDED
TO KNOWLEDGE
SUFFICIENCY OF FILING

FILED
15 MAR 30 AM 9:18
STATE DEPT OF STATE
TALLAHASSEE FLORIDA

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 567520 5146788

AUTHORIZATION :

COST LIMIT : \$ 87.50

Lyndee Coleman

ORDER DATE : March 27, 2015

ORDER TIME : 2:29 PM

ORDER NO. : 567520-005

CUSTOMER NO: 5146788

FOREIGN FILINGS

NAME: COMMUNITY MEDIA GROUP
MANAGEMENT SERVICES, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER: _____

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STATE OF FLORIDA
TALLAHASSEE

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Community Media Group Management Services, Inc.
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Kristen Ahlberg
Name of Person
Community Media Group
Firm/Company
805 S. Logan St. P.O. Box 10
Address
West Frankfort, IL 62896
City/State and Zip code
Kahlberg@cmgms.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kristen Ahlberg at (618) 937-6412
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Community Media Group Management Services, Inc.
(Enter name of corporation, must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Community Media Group, Inc.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NV 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 3/4/1996 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon qualification
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 200 Ocean Lane Apt. PH-5 Key Biscayne, FL 33149
(Principal office address)

805 S. Logan St. P.O. Box 10 West Frankfort, IL 62896
(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(City) (Zip code)

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TALLAHASSEE FLORIDA

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Sina Quattrone

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: See Attached

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: See Attached

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. Kristen Ahlberg Asst. Secretary

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

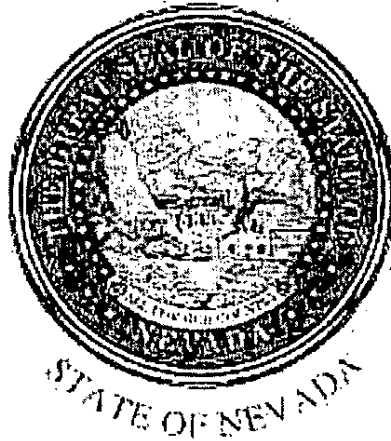
13. Kristen Ahlberg

(Typed or printed name and capacity of person signing application)

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TALLAHASSEE FLORIDA

Larry J. Perrotto	President, Director
PO Box 10; West Frankfort, IL 62896	
Joan R. Williams	Executive Vice President, Secretary, Treasurer, Director
PO Box 10; West Frankfort, IL 62896	
John Satterwhite	Vice Chairman, Director
PO Box 94; Bradford PA 16701	
Mark J. Perrotto	Chief Executive Officer, Executive Vice President, Director
PO Box 10; West Frankfort, IL 62896	
John D. Perrotto	Executive Vice President, Director
PO Box 10; West Frankfort, IL 62896	
James F. Perrotto	Director
PO Box 10; West Frankfort, IL 62896	
Margaret Satterwhite Brown	Director
PO Box 94; Bradford PA 16701	
Kristen Ahlberg	Assistant Secretary
PO Box 10; West Frankfort, IL 62896	

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **COMMUNITY MEDIA GROUP MANAGEMENT SERVICES, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since March 4, 1996, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on March 27, 2015.

Barbara K. Cegavske

BARBARA K. CEGAVSKE
Secretary of State

Electronic Certificate
Certificate Number: C20150327-2397
You may verify this electronic certificate
online at <http://www.nvsos.gov/>

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