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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : VCORP SERVICES, LLC

Account Number : 120080000067 Phone : (845)425-0077 : (845)818-3588 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

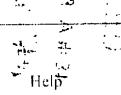
Email Address:___

FOREIGN PROFIT/NONPROFIT CORPORATION

Brookline Media Inc.

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Electronic Filing Menu Corporate Filing Menu



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| Brookline Media | Inc. | | | | | |
| (Enter name of co | rporation; must include "INCORPO rp," "Inc," "Co," or "Corp.") | ORATED," "C | OMPANY," "CORPO | RATION," | | - |
| (If name unavaila | ble in Florida, enter alternate corpo | orate name adop | ted for the purpose of t | ransacting bu | siness in | Florida) |
| Delaware | | 3 | | | | |
| (State or country | under the law of which it is incorp | porated) | (FEI num | ber, if applies | ble) | |
| 10/22/2018 | of incorporation) | | | | | |
| (Date | of incorporation) | | (Date of duration, | if other than | perpetual |)) |
| | | | | | | |
| | (Date first transacted | business in Flo | orida, if prior to registra | tion) | | |
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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.

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| A. DIRECTORS | | | 4d | D l | |
|---|--|---|--|-------------------------------|--|
| □ Chairman | Name: Matthew Sechrest | □Chairman | Name: Andrew Perlman 701 Brickell Avenue, Suite 1550, Miami, FL 33131 | | |
| ☐ Vice Chairman | Address: | □Vice Chairman | | | |
| Director | Miami, FL 33131 | Director | | | |
| □President | | □President | | 1000 | |
| ☐ Vice President | | □Vice President | | | |
| □Secretary | ■ Treasurer | □Secretary | | ☐Treasurer Chainnan | |
| □Other | Other | □Other | | Other | |
| | | | | | |
| □Chairman | Name: | □ Chairman | Name: | | |
| □Vice Chairman | Address: | □Vice Chairman | Address: | | |
| □Director | | □Director | | | |
| □President | | □President | | | |
| ☐ Vice President | | □Vice President | | | |
| □Secretary | □Treasurer | □Secretary | | □Treasurer | |
| ☐Other | | □Other | | □Other | |
| □Chairman | Name: | □Chairman | Name: | | |
| | Address: | ∃Vice Chairman | Address: | | |
| | | □Director | | | |
| □Director | | ZIPresident | | | |
| J1President | | □Vice President | | | |
| | 700 | ☐ Secretary | | DTreasurer | |
| □Secretary | □Treasurer | DOther | | Other | |
| □Other | | | | | |
| Important Notice: individuals_may_b | Use an attachment to report more than six (6). The at e added to the index when filing your Florida Departmens. | tachment will be imag nent of State Annual R | ed for reporting leport form. | purposes only. Non-indexed | |
| 12. Andr | W Fextman Signature of Director | | | | |
| 2 | | | | | |
| she is aware that to s.817.155, F.S. | ector signing this document (and who is listed in numl false information submitted in a document to the Depa riman, Chairman | artiment of State constit | inter the facts star tutes a third degr | ree felony as provided for in | |
| | (Typed or printed name and capacity of per | rson signing application | n) | | |

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BROOKLINE MEDIA INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF JULY, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BROOKLINE MEDIA INC." WAS INCORPORATED ON THE TWENTY-SECOND DAY OF OCTOBER, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

Authentication: 203346003

Date: 07-24-20