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	Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	<del></del>
PICK-UP	WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
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## **COVER LETTER**

то:	Registration Section Division of Corporations				
SUBJ	JECT: Local Independent Online News Publishers,	Inc.			
	Name of Corporation	- must include suffix			
Dear S	Sir or Madam:				
Affairs	nclosed "Application by Foreign Not for Profit Crs in Florida", "Certificate of Existence", or "Certificate of Existence", o	ificate of Status" and ch	eck are submitted to		
Please	e return all correspondence concerning this matte	r to the following:			
	Lisa Hunter				
	Name of F	Person	<del></del>		
	Local Independent Online News Publisher	s, Inc.			
	Firm/Cor	npany			
	4023 Kennett Pike Suite 50019	4023 Kennett Pike Suite 50019			
	Addre	Address			
	Wilmington, DE 19807				
	City/State and	Zip Code	<del></del>		
	payment@lionpublishers.com				
	E-mail address: (to be used for fut	ure annual report notific	ation)		
For fu	arther information concerning this matter, please	call:			
Lisa !	Hunter 41	5 205-3176			
	Name of Person Ai	ea Code Daytime Te	lephone Number		
	Mailing Address:	Street Address:			
Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee					
	Tallahassee, FL 32314	2415 N. Monroe Str Tallahassee, FL 323	· ·		
Enclos Please	sed is a check for the following amount: make check payable to: FLORIDA DEPARTMEN	Γ OF STATE			
		3\$78.75 Filing Fee & Certified Copy	□S87.50 Filing Fee, Certificate of Status & Certified Copy		

## APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

(If name unava	ailable in Florida, enter alternate	corporate name adopted for	the purpose of transacting	ousiness in	Florida	1)
Delaware		<b>3.46-078165</b> 4	1			
(State or cou	ntry under the law of which it is	incorporated)	(FE) number, if applica	61 <del>c)</del>		_
12/20/2021		5.				
(1	Date of Incorporation)	<u> </u>	Date of duration, if other th	nan perpetua	d)	
5/16/2022						
(Date first cond	ucted affairs in Florida if prior to	registration. See sections 617.	1501 & 617.1502, F.S. to d	ctermine per	alty liai	bility.
4023 Kennett	Pike Suite 50019 Wilmington, E	DE 19807				
		(Principal office street add	ress)			_
		Jurent mailing address, if di	itterent)			
	(0	Current mailing address, if di	ifferent)	€,	202	
Uira of ramots	·	_		₩ ,	2i22 SI	<del></del>
Hire of remote	·	_		19	2102 SEP	
Hire of remote (Purpose(s) of	·	_		= ·	2102 SER 24	1 -
(Purpose(s) of	·	state or country to be carried	out in the state of Florida)	<b>:</b>	2102 SER 24 '	্ 
(Purpose(s) of	e employee corporation authorized in home eet address of Florida register	state or country to be carried red agent: (P.O. Box <u>NOT</u>	out in the state of Florida)  [ acceptable)	· · · · · · · · · · · · · · · · · · ·	2022 SER 24 111	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
(Purpose(s) of	e employee corporation authorized in home eet address of Florida register	state or country to be carried red agent: (P.O. Box <u>NOT</u>	out in the state of Florida)  [ acceptable)	in the	2022 SER 24	- 11 3 0 0 0 0 M L
(Purpose(s) of Name and str	e employee corporation authorized in home eet address of Florida register Incorp Services, Inc.	state or country to be carried red agent: (P.O. Box <u>NO</u> T	Lout in the state of Florida) $\Gamma$ acceptable)	190 - in 1800	2022 SER 24 111 7 -	-dob ph 4:27
Name and str	e employee corporation authorized in home eet address of Florida register Incorp Services, Inc.	state or country to be carried red agent: (P.O. Box <u>NO</u> T	I out in the state of Florida)  Cacceptable)	in terms	2022 SEP 24 111 7 -	

11. 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.

12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

Chairman   Name:	A. DIRECTOR			
Director   Lawrenceville, GA 30043   Director   Miami, FL 33177     President   Director   Director   Miami, FL 33177     President   Director   Director   Director   Director     Other:	<b>≣</b> Chairman		Chairman	Rebekah Monson Name:
President	□Vice Chairman	Address:	■Vice Chairman	Address: 19505 Southwest 128th Ave
Chairman   Name:   Rosemary Hoban   Chairman   Address:   Golder:   Chairman	□Director		_	Miami, FL 33177
Chairman   Name:   Rosemary Hoban   Chairman   Name:   Foresident   Chairman   Name:   Secretary   Chairman   Name:   Secretary   Chairman   Name:   Sold Monroe Road   Charlotte, NC 28212   Chairman   Name:   Sold Monroe Road   Charlotte, NC 28212   Chairman   Chapel Hill, NC 27703   Charlotte, NC 28212	□President		DPresident	
Other:	□Vice President		\bigcup Vice President	,
Chairman   Name:   Rosemary Hoban     Chairman   Name:   Alvaro Gurdian       Vice Chairman   Address:   991 Cleland Drive     Vice Chairman   Address:   5936 Monroe Road     Chapel Hill, NC 27703     Director   Charlotte, NC 28212     President                           President                           Vice President                           Secretary                                       Chairman   Name:   Jay Allred	☐ Secretary	□Treasurer	☐ Secretary	□Treasurer
Olive Chairman   Olive   Olive Chairman   Olive Chairma	Other:	Other:	Other:	☐Other:
Olicetor	□Chairman	Name: Rosemary Hoban	□Chairman	Alvaro Gurdian
Director   Chapel Hill, NC 27703   Director   Charlotte, NC 28212     President   President     Vice President   Vice President     Secretary   Treasurer   Secretary   Treasurer     Other:	□Vice Chairman			Address: 5936 Monroe Road
Secretary	□Director			
Secretary   Treasurer   Secretary   Treasurer   Other:	□President		President	
Other:   O	□Vice President		□Vice President	
Director   Address:   His6 15th Street NW     Director   Directo	<b>■</b> Secretary	□Treasurer	□Secretary	■ Treasurer
Vice Chairman   Address:   40 West 4th Street   Vice Chairman   Address:   1156 15th Street NW     Director   Mansfield, OH 44902	□Other:	Other:	Other:	Other:
Vice Chairman   Address:   40 West 4th Street   Vice Chairman   Address:   1156 15th Street NW     Director   Mansfield, OH 44902   Director   Washington, DC 20005     President   President   Vice President     Vice President   Vice President   Vice President     Other:   Other:   Other:   Other:   Other:     NOTE:   Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes of Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.    13.   Tracie Powell   Board Chair   Board Chair	□Chairman	Jay Alfred	∏ Chairman	Same: Gunita Singh
□ Director  Mansfield, OH 44902 □ Director □ President □ Vice President □ Vice President □ Secretary □ Treasurer □ Other: □ Other: □ □		40 West 4th Street		1156 15th Street NW
□ Vice President □ Secretary □ Treasurer □ Secretary □ Treasurer □ Other: □ Other: □ Other: □ □ Oth	_			
Secretary	□President			
NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes of Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.    13.   Deal Fault   (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)   Tracie Powell   Board Chair	□Vice President		□ Vice President	
NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes of Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.  13. Their Pauli (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) Tracie Powell Board Chair	☐ Secretary	□Treasurer	☐ Secretary	□Treasurer
Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.  13. Tracie Powell Board Chairman, Vice Chairman, or any officer listed in number 12 of the application)  Board Chair	■Other: Past Cha	nir	Other:	□Other:
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)  Tracie Powell Board Chair  14.	Non-indexed indi			
14.	- Mindianista	=	r any officer listed in number	12 of the application)
(Typed or printed name and capacity of person signing application)		Board Charr	· · · · · · · · · · · · · · · · · · ·	<del> </del>



## State of Belaware

SECRETARY OF STATE DIVISION OF CORPORATIONS P.O. BOX 898 DOVER, DELAWARE 19903

8660106

08-25-2022

LOCAL INDEPENDENT ONLINE NEWS PUBLISHERS, INC. 1552 GUERRERO ST.

APT. 1

SAN FRANCISCO, CA 94110

ATTN: LISA HUNTER

DESCRIPTION		AMOUNT
6486961 - LOCAL INDEPENDENT ONLINE NEWS PUBLISHERS, INC. Entity Status - Short Form		
	Certification Fee	\$50.00
	Expedite Fee, 24 Hour	\$40.00
	TOTAL CHARGES	\$90.00
	TOTAL PAYMENTS	\$90.00
	BALANCE	\$0.00



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "LOCAL INDEPENDENT ONLINE NEWS

PUBLISHERS, 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-FIFTH DAY OF AUGUST, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS AN EXEMPT CORPORATION.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LOCAL INDEPENDENT ONLINE NEWS PUBLISHERS, INC." WAS INCORPORATED ON THE TWENTIETH DAY OF DECEMBER, A.D. 2021.

Authentication: 204143588

Date: 08-25-22