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(((H24000051858 3)))



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FOREIGN PROFIT/NONPROFIT CORPORATION

Broadcast Manager, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	11
Estimated Charge	\$78.75

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February 8, 2024

FLORIDA DEPARTMENT OF STATE Division of Corporations

COMPUTERSHARE

SUBJECT: BROADCAST MANAGER, INC.

REF: W24000022024

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

If you have any further questions concerning your document, please call (850) 245-6051.

Ariel Jones Regulatory Specialist II Registration Section

FAX Aud. #: H24000051858 Letter Number: 624A00002873

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. Broadcast Man	ager, Inc.				
(Enter name of a "Inc.," "Co.," "C	corporation; must include "INCORPORATED," lorp," "Inc," "Co," or "Corp.")	"COMPANY." "CORPORATION	S.T		
H name mayai	lable in Florida, pater alternate	1	- , , , , , , , , , , , , , , , , , , ,		
Now York	lable in Florida, enter alternate corporate name ac				
02/05/1002	ry under the law of which it is incorporated)				
(Date	of incorporation)	(Date of duration, if other than perpetual)			
/// Westchester	Ave, Suite 101, White Plains NY 10604 (Principal office	e street address)			
	(Current mailing	address, if different)			
. Name and stree	et address of Florida registered agent: (P.O. Corporate Creations Network Inc.	Box NOT acceptable)	2024 FEB -9 AM SECRETARY OF A		
ffice Address:	801 US Highway 1		B -9		
	North Palm Beach	. Florida 33408			
	(City)	(Zip code)	31VLS 11 16 11 16 11		
. Registered ag	ent's acceptance:		1 = 1		

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.

Tymbollyn Utur Tymberlyn Teefey, Special Secretary (Regulered 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.

A. DIRECTORS David Berkal Mary DelGrande □Chairman □ Chairman 777 Westchester Ave, Suite 101 777 Westchester Ave, Suite 101 □Vice Chairman Address: □ Vice Chairman Address: White Plains, NY 10604 White Plains, NY 10604 Director □ Director ■ President □President ☐Vice President □ Vice President □ Secretary □ Secretary Treasurer □ Treasurer ■Other <u>CEO</u> Other ____ Other _____ Other _____ Marjan Elbaum Mitchell Glickman Chairman □Chairman Name: 777 Westchester Ave, Suite 101 Address: 777 Westchester Ave STE 101 ☐ Vice Chairman Address: □Vice Chairman White Plains, NY 10604 White Plains, NY 10604 □ Director □ Director □ President □President □Vice President □Vice President ☐Treasurer ■Secretary □ Secretary **■**Treasurer Other _____ □Other _____ □Other _____ □Other _____ Name: □ Chairman Name: □Chairman □Vice Chairman Address: ☐ Vice Chairman Address: Director □ Director □ President □President ☐Vice President □Vice President ☐Treasurer ☐ Secretary □ Secretary □ Treasurer □Other _____ □Other _____ ☐Other _____ □Other _____ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. /s/ David Berkal Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: BROADCAST MANAGER, INC.

DOS ID Number: 1618178

Entity Type: DOMESTIC BUSINESS CORPORATION

Entity Status: EXISTING

Date of Initial Filing with DOS: 03/05/1992

Statement Status: CURRENT

Statement Due Date: 03/31/2024

I certify that the following is a list of documents on file in the Department of State for said entity:

Document Type: CERTIFICATE OF INCORPORATION

Date of Filing: 03/05/1992

Entity Name: BROADCAST MANAGER, INC.

Document Type: BIENNIAL STATEMENT

Date of Filing: 03/28/1994 **Effective Date:** 03/01/1994

Document Type: BIENNIAL STATEMENT

 Date of Filing:
 03/24/1998

 Effective Date:
 03/01/1998

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Document Type:	BIENNIAL STATEMENT
Date of Filing:	03/21/2000
Effective Date:	03/01/2000
• · · ·-	
Document Type:	BIENNIAL STATEMENT
Date of Filing:	03/05/2002
Effective Date:	03/01/2002
Document Type:	BIENNIAL STATEMENT
Date of Filing:	03/17/2004
Effective Date:	03/01/2004
Document Type:	BIENNIAL STATEMENT
Date of Filing:	09/05/2014
Effective Date:	03/01/2014
Document Type:	BIENNIAL STATEMENT
Date of Filing:	03/07/2016
Effective Date:	03/01/2016
Document Type:	BIENNIAL STATEMENT
Date of Filing:	03/07/2018
Effective Date:	03/01/2018
Document Type:	BIENNIAL STATEMENT
Date of Filing:	10/30/2020
Effective Date:	03/01/2020
Document Type:	BIENNIAL STATEMENT
Date of Filing:	12/05/2023
Effective Date:	03/01/2022
Document Type:	CERTIFICATE OF CHANGE BY ENTITY
Date of Filing:	02/02/2024
C.	

Above space is left blank intentionally,

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on February 06, 2024 at 01:58 P.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon C Higher

By Brendan C. Hughes Executive Deputy Secretary of State

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