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TRANSMITTAL LETTER

Division of Corporations	·	-
SUBJECT: Panama City Radio, LLC	3	
(Name of Limi	ted Liability Company)	
The enclosed Articles of Organization and fee(s) are	submitted for filing	
	-	
Please return all correspondence concerning this may	tter to the following:	
Martin A. Clayman, Esq	!•	
	(Name of Person)	
Clayman, Tapper & Bara		
	(Firm/Company)	
Three Regency Drive	(Address)	
	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Bloomfield, CT 06002 (Ci	ty/State and Zip Code)	-
		es j
For further information concerning this matter, pleas	se call:	
Martin A. Clayman	860 242-2221	SECTION FEC TO
(Name of Person)	at (
Enclosed is a check for the following amount:		P# 01
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of Status	-	I \$160.00 Filing Fee, Certificate of Status &
Confined of Status	(additional copy is enclosed)	Certified Copy
	(:	additional copy is enclosed)
STREET ADDRESS:	MAILING ADD	RESS:
Registration Section	Registration Sect	ion
Division of Corporations 409 E. Gaines Street	Division of Corpo P.O. Box 6327	orations

Tallahassee, Florida 32314

Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Li	mited Liability Company is:				
Panama City	Radio, LLC	<u>., T</u>	<u>-,</u> /		ء ﷺ ليجي
ARTICLE II - Ad The mailing addres	dress: s and street address of the principal office of the Limited	Liabili	ty Con	apany is:	
Principal Office A	ddress: Mailing Address:	٠		-	
Suite 110	Roulevard same				ing and the second seco
ARTICLE III - Re	egistered Agent, Registered Office, & Registered Agen	at's Sig	nature	i.e.	
The name and the F	lorida street address of the registered agent are: Nicholas J. Robinson Name 100 Lake Shore Drive, #2051 Florida street address (P.O. Box NOT acceptable) North Palm Reach City, State, and Zip	SECRETATION HAVE	101 CEC 10 P 4: 04	The second secon	•
lìability compar registered agent an statutes relating t	ad as registered agent and to accept service of process for any at the place designated in this certificate, I hereby accepted agree to act in this capacity. I further agree to comply we on the proper and complete performance of my duties, and cations of my position as legistered agent as provided for its Registered Agent's Signature	nt the ap vith the I am fan	pointm provisi niliar w	ent as ions of all with and	

(CONTINUED)

Name and Address: "MGR" = Manager "MGRM" = Managing Member Nicholas H. Robinson MGRM #2051 100 Lake Shore Drive. North Palm Beach, FL 33408 (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. (In accordance with action 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Nicholas H. Robinson Typed or printed name of signee Filing Fees:

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)