

# **2013 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000015853

**FILED**  
**Oct 07, 2013**  
**Secretary of State**

**Entity Name:** PHILLIPS BROADCASTING, LLC

**Current Principal Place of Business:**

567 LEWIS POINT RD EXTENSION  
ST. AUGUSTINE, FL 32086

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 3847  
ST. AUGUSTINE, FL 32085

**New Mailing Address:**

**FEI Number:** 20-4770289

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PHILLIPS, KRISTINE  
567 LEWIS POINT EXTENSION  
ST. AUGUSTINE, FL 32086 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: KRISTINE PHILLIPS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: PHILLIPS, KRISTINE L  
Address: 567 LEWIS POINT EXTENSION  
City-St-Zip: ST. AUGUSTINE, FL 32086 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KRISTINE PHILLIPS

MGR

10/07/2013

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date