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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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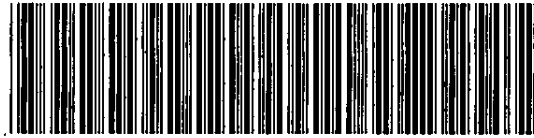
(Business Entity Name)

(Document Number)

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# Salfi Law

LAW OFFICES OF DOMINICK J. SALFI, P.A.

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## ATTORNEYS AND COUNSELORS AT LAW

### ATTORNEYS:

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### LEGAL ASSISTANTS:

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GAYLE HAIR, C.L.A.

### LEGAL STAFF

WANDA COX  
KYLE HAIR

June 19, 2007

Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

RE: KING TV, L.L.C.

Gentlemen:

Enclosed herewith for filing is Articles of Organization of KING TV, L.L.C. Also enclosed is our check in the amount of \$155.00 representing the filing fee, Designation of Registered Agent and Certified Copy.

Sincerely,

  
Dominick J. Salfi

DJS/ac  
Enclosures

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**ARTICLES OF ORGANIZATION  
OF  
KING TV, L.L.C.**

**ARTICLE I- Name:**

The name of the limited liability company is:

KING TV, L.L.C.

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

999 Douglas Avenue, Suite 3333, Altamonte Springs, FL 32714.

**ARTICLE III - Registered Agent. Registered Office, & Registered Agent's Signature:**

The name and Florida street address of the registered agent are:

Dominick J. Salfi  
999 Douglas Avenue, Suite 3333  
Altamonte Springs, FL 32714.

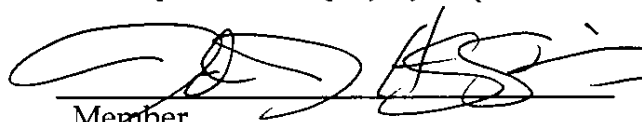
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

  
\_\_\_\_\_  
Dominick J. Salfi, Registered Agent

**ARTICLE IV - Management**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

In accordance with section 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.

  
\_\_\_\_\_  
Member

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**CONSENT TO  
APPOINTMENT AS REGISTERED AGENT**

I, Dominick J. Salfi, accept the appointment as registered agent and state that I am familiar with and accept the obligations of the position.

DATED 6/18/07.

  
Dominick J. Salfi

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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