Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H110002100073)))



H110002100073ABCM

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

L. SELLERS

To:

Division of Corporations

Fax Number : (850)617-6383

AUG 24 2011

From:

EXAMINER

Account Name : C T CORPORATION SYSTE

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company Telemundo Group LLC

RECEIVED

1 AUG 23 PH Q: 18

ECRETANY OF STATE
LLAHASSEE. FLORID

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

MAUG 23 PHIZ: 48

COVER LETTER

	Name of Limited Liability Company
The enclosed "Application by Foreign Limited Existence, and check are submitted to register	Liability Company for Authorization to Transact Business in Florida," Certificate of the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning th	is matter to the following:
GABRIELA KORNZV	VEIG
	Name of Person
NBCUNIVERSAL	
	Firm/Company
100 UNIVERSAL CI	TY PLAZA
	Address
UNIVERSAL CITY, C	A 91608
	City/State and Zip Code
karen.sorensen@r	bcuni.com_
E-mail addre	ss: (to be used for future annual report notification)
For further information concerning this matter,	piease call:
GABRIELA KORNZWEI	3 _{at (.} 818 ₎ 777-8636
Name of Person	Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations	STREET ADDRESS: Division of Corporations
Registration Section P.O. Box 6327	Registration Section Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following as	
\$125.00 Filing Fee \$130.00 Filing Certificate o	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN

IMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE	STATE OF FLORIDA:
Telemundo Group LLC	
(Name of Foreign Limited Liability Company; must inclu	ide "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writt consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")	
Delaware 3	3, 13-3348686
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
. 5/28/1986 s	, PERPETUAL
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
. 1/20/2011	
(Date first transacted business in Fig (See sections 608.501 & 608.502 F.S.	to determine penalty liability)
2290 West 8th Avenue	
Hialeah, FL 33010	
(Street Address	of Principal Office)
. If limited liability company is a manager-managed	company, check here
. The name and usual business addresses of the man-	aging members or managers are as follows:
Richard Cotton	
30 Rockefeller Plaza	
New York, NY 10112	
 Attached is an original certificate of existence, no more than 90 of the jurisdiction under the law of which it is organized. (A photocopy ranslation of the certificate under cath of the translator must be subtranslated. 	
1. Nature of business or purposes to be conducted or	r promoted in Florida: Entertainment
1/10/1/	athorized representative of a member.
Signature of a member or an au	ithorized representative of a member.
(In accordance with section 608,408(3), F.S., the exec	oution of this document constitutes an affirmation under the
penalties of perjury that the facts stated herein are true	us. I are aware that any false information submitted in a

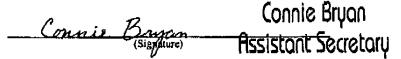
GABRIELA KORNZWEIG, AUTHORIZED REPRESENTATIVE Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

The name of the Limited Liability Company is:
elemundo Group LLC
mavailable, the alternate to be used in the state of Florida is:
The name and the Florida street address of the registered agent and office are:
C T Corporation System
(Name)
1200 South Pine Island Road
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Plantation FL 33324
City/State/Zip

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, Florida Statutes.



\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)