# M12000006866

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DEPARTMENT OF STATE

DIMISION OF COMPERATIONS

2012 DEC -7 AM IN: NO

C. LEWIS
DEC 1 1 2012
EXAMINER



ACCOUNT NO. : I2000000195

REFERENCE :

436167

4304512

AUTHORIZATION

COST LIMIT

ORDER DATE: November 28, 2012

ORDER TIME : 10:31 AM

ORDER NO. : 436167-090

CUSTOMER NO: 4304512

#### FOREIGN FILINGS

NAME: TRIBUNE MEDIA SERVICES, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes -- EXT# 52920

EXAMINER:

and olease.

### 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 LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Tribune Media Services, LLC (Name of Foreign Limited Liability Company; must include "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 written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") 2. Delaware (Jurisdiction under the law of which foreign limited liabilit company is organized) 03/27/1933 5. Perpetual (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") 6. 11/21/2012 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7 435 N. Michigan Avenue, Chicago, IL 60611 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: Tribune Investments, LLC, Member 435 N. Michigan Avenue, Chicago, IL 60611 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: To engage in any lawful act or activity for which a company may be organized under the Delaware LLC Act and permitted under the Florida LLC Act. Signature of a member or an authorized representative of a member. (In accordance with section 608,408(3), F.S., the execution of this document constitutes an affirmation under the

penalties of perjury that the facts stated herein are true. I am aware that any 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.)

Typed or printed name of signee

David P. Eldersveld, Authorized Person

## 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.

1. The name o	f the Limited Liability Co	ompany is:		
Tribune Media	Services, LLC			
If unavailable,	the alternate to be used in	the state of Florida is:		
2. The name a	nd the Florida street addre	ess of the registered agent and office ar	e:	il Nig
	Corporation Service Com	pany	2912 DEC	500
		(Name)		F 27
	1201 Hays Street			
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)		
	Tallahassee	FL 32301	ā	<b>غ</b> َّدُ وَ
		City/State/Zip	<del></del>	

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.

Corpo	oration Serv	ice/Com	bany		
.Ву:	JU.	gu	(	 	
	7		(Signature)		 

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

## Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TRIBUNE MEDIA SERVICES, LLC" IS

DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF

THIS OFFICE SHOW, AS OF THE TWENTY-EIGHTH DAY OF NOVEMBER, A.D.

2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TRIBUNE MEDIA SERVICES, LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF MARCH,

A.D. 1933.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE.

BEEN FILED TO DATE.

0322320 8300

121271811

AUTHENTY CATION: 0018278

DATE: 11-28-12

You may verify this certificate online at corp. delaware.gov/authver.shtml