(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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D				
Date: 01/27/2016	Account #: I2000000088			
Name: Darian Shump				
Reference #: M077584				
ENTITY NAME: UNIVISION STORY HOUSE, LLC				
Articles of Incorporation/Authorization to Transact Business				
Amendment				
Annual Report				
Change of Agent				
Reinstatement				
Conversion				
Merger				
Dissolution/Withdrawal				
Fictitious Name				
Other:				
Authorized Amount: 125.00				
Signature:				

COVER LETTER

TO:	Registration Section Division of Corporation	ons				
SUBJE	Univision Story H					
		Name o	f Limited Liability	Company		
					ransact-Business in Florida," ty company to transact busine	
Please r	eturn all correspondence	concerning this matter to th	ne following:			
	Alice Y. Oha	shi, Sr. Paralegal				
			Name of Person			
	O'Melveny &	Myers LLP				
			Firm/Company			
	1999 Avenue	of the Stars, Suite 700				
			Address		**************************************	
	Los Angeles.	CA 90067				
	adoldaniam. V vičiniki (gygygyyy) wysynapami n	City/	State and Zip Code			
	JAceves/gunivi	sion.net				
		E-mail address: (to be us	ed for future annua.	l report no	lification)	
For furth	er information concernia	ng this matter, please call:				
	Alice Y. Ohashi		310 at (246-67	736	
	Name	of Contact Person	Area Code	Day	rtime Telephone Number	
	MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314	<u>:</u> s		Division Registrat Clifton B 2661 Exc	CADDRESS: of Corporations ion Section tuilding recutive Center Circle see, FL 32301	
Enclosec	l is a check for the follow S125.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filir Certified Copy	ig Fee &	☐ \$160.00 Filing Fee, Cer of Status & Certified Copy	

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

	TÍON 608 (1903) (TÚDRÍDA STATI (TES THE FOLL USINESS ÍNTHE STATEOFT LORIDA:	DHING IS SUBMITTED TO REGISTER A FOI	REKON JANTAD LANDUAT.
Univision Story House			
(Name of Par	eign Limited/Liability Company: must include "l	Limited Liability Company, "L.L.C.," or "LI	(C_n)
(If name unavailable, enter a Liability Company," "L.L.C.	Iternate name adopted for the purpose of transact	ting business in Florida. The alternate name n	ust incliide "Limited"
2 Delaware	3.		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
combant, is ordinareed.			
4	(Date first transacted business in Ployld	a, if prior to registration.)	
	(See sections 605,0904 & 605,0905; F.S.)	o determine penalty hability)	
5.			,
9405 NW 41st Street.	Minmi: FL 33178		
	(Street Address of Principal Of	lice)	
6,			
	(Mailing Address)		
			2.7 ARY SSE
Name and street address	is of Florida registered agent: (P.O. Box No.	OT acceptable)	rica
Name:	C T Corporation System	<u> </u>	· 'm™ . ▶
	1200-South Pine Island Road		S ₹ ₽
Office Address:			
	Plantation '	Florida 33324	. عد الم
Registered agent's accept	(City)	(Zip code)	
Having been named as red designated in this application to complywith the provision accept the obligations of n	gistered agent and to accept service of praction. I hereby accept the appointment as re- cons of all statutes relative to the proper and my position as registered agent. It Componing System By:	gistered agent and agree to act in this ca complete performance of my duties, and Nicole Ct	pacity. I further agree II am familiar with an
	(légistered agent's	signoluce):	
9. The name title or sone	city and address of the person(s) who has/ha	ua authoritis ta managa is/aras	
,	ia. Inc., sole member, 605 Third Ave., 12th		
CHIN ISIGII MICIACIIVE MICO	at the speciment of the twee 12th	That for this et to to	
			مشقد بموجودود
D. Attached is a certificate urisdiction under the law end the urinslator must be su	of existence, no more than 90 days old, duly of which it is organized. (If the certificate is i bmitted)	authenticated by the official having custon a foreign language, a translation of the	dy of records in the certificate under nath
•	Signature of an anthori	ard person	
This document is executed	in accordance with section 605 0203 (1) (b), the Department of State constitutes a third de	Florida Statutes. Lam aware that any false	Information F.S.
And the same of th	John Assure Aset Sassuan at Univision I	· · · · · · · · · · · · · · · · · · ·	

Typed or printed name of signee

<u>Delaware</u>

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "UNIVISION STORY HOUSE, 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-SIXTH DAY OF JANUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "UNIVISION STORY HOUSE, LLC" WAS FORMED ON THE TWENTY-SIXTH DAY OF JANUARY, A.D. 2016.

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

Authentication: 201732006

Date: 01-26-16

5947592 8300 SR# 20160411450