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S Warren FEB 0 6 2017 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 494766 5123330

AUTHORIZATION :

COST LIMIT : \$/125.00

ORDER DATE: February 1, 2017

ORDER TIME: 4:16 PM

ORDER NO. : 494766-150

CUSTOMER NO: 5123330

#### FOREIGN FILINGS

NAME: WFTV, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams # 62935

EXAMINER:

#### **COVER LETTER**

TO:	Registration Section Division of Corporation	5					
~~~	WFTV, LLC						
SUBJE	:Cr:	Name of L	imited Liability Compar	ny			
The end Existen	closed "Application by Fore	eign Limited Liability Compa I to register the above referer	ny for Authorization to aced foreign limited liab	Transact Business in Florida," Certificate of bility company to transact business in Florida			
Please 1	return all correspondence c	oncerning this matter to the f	ollowing:				
		Barb	ara Williamson				
		Na	me of Person				
	Cox Enterprises, Inc., Attn: Legal Department						
	Firm/Company						
		6205-A Peachte	ee Dunwoody Road				
	Address						
	•	Atlanta,	GA 30328				
		City/St	ate and Zip Code				
				4 - 4'5' - 4' - 11'			
		E-mail address: (to be used	for future annual repor	t notification)			
For fur	ther information concernin	g this matter, please call:					
-	Barbara Williamson		_ at ()	5-0841			
	Name o	of Contact Person	Area Code	Daytime Telephone Number			
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				
Enclos	sed is a check for the follow	_	<b>-</b>	6 F 61 (0 00 PW P C VC			
	□ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Feet Certified Copy	e & \$\Bigcup \\$160.00 Filing Fee, Certificate of Status & Certified Copy			

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

IN COMPLIANCE WITH SECTION 605.0902, ITLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

, WFTV, LLC			
(Name of Fore	eign Limited Liability Company; must include "Limited Lis	ability Company," "L.L.C.," or "	LLC.")
(If name unavailable, enter al Liability Company," "L.L.C,"	ternate name adopted for the purpose of transacting busine " or "LLC.")	ss in Florida. The alternate name	e must include "Limited
2. Delaware	3. 11-3666527		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
4			
	(Date first transacted business in Florida, if prior t (See sections 605.0904 & 605.0905, F.S. to determine	o registration.) ne penalty liability)	
5. 6205-A Peachtree Dun	woody Road	·	
Atlanta, GA 30328	emil)		
	(Street Address of Principal Office)	Tage Stage	
6. 6205-A Peachtree Dun	woody Road	23	Transco Transco
Atlanta, GA 30328		7.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00	m
	(Mailing Address)	<u> </u>	
7. Name and street addres	ss of Florida registered agent: (P.O. Box NOT accep	otable) STATE	<del></del>
Name:	Corporation Service Company	<b>A</b>	<b>©</b>
Office Address:	1201 Hays Street	<del></del>	·
	Tallahassee	, Florida 32301 (Zip code)	
•	(City)	(Zip code)	•
designated in this applica to complywith the provisi	egistered agent and to accept service of process for the stion, I hereby accept the appointment as registered thous of all statutes relative to the proper and completing position as registered agent.  Corporation Service Company  By:	agent and agree to act in thi te performance of my duties, Courtne	s capacity. I further agree
	(Registered agent's signature		+6 1 103ld0//-
8. The name, title or cap Juliette W. Pryor	acity and address of the person(s) who has/have authorized	ority to manage is/are:	
Director	•		
6205-A Peachtree Dunw	oody Road, Atlanta, GA 30328		
	e of existence, no more than 90 days old, duly authent of which it is organized. (If the certificate is in a fore submitted)		
	Signature of an authorized pers	son	
	ed in accordance with section 605.0203 (1) (b), Florida to the Department of State constitutes a third degree for		
	Charles N. Bowen		

Typed or printed name of signee

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "WFTV, 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 THIRD DAY OF FEBRUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WFTV, LLC" WAS FORMED ON THE NINTH DAY OF DECEMBER, A.D. 2002.

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

Authentication: 201979605

Date: 02-03-17

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