7/22/2021



Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338 Phone : (954)208-0845 Fax Number

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

Email Address:__

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN FOX SPORTS NET FLORIDA, LLC

Certificate of Status	0
Certified Copy	1
Page Count	()4
Estimated Charge	\$55.00

Electronic Filing Menu

Corporate Filing Menu

Help

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of	r
State: Fox Sports Net Florida, LLC	
Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address	
MAY BE A POST OFFICE BOX)	20 -1 -2
2. The Florida document number of this limited liability company is: M20000005826	NA 985
3. Jurisdiction of its organization: Delawate	
4. Date authorized to do business in Florida: June 26, 2020	12: L
SECTION II (5-9 complete only the applicable changes)	et Florida, LLC ed Liability Company. ""L.L.C.," or "LLC.") of transacting business in Florida and attach a sadopting the alternate name. The alternate name ses on our records, enter the name of the new Enter Florida Street Address ity Zip Code act in this capacity. I further agree to comply with
5. New name of the limited liability company: Diamond Sports Net Florida, LLC (must contain "Limited Liability Company," "L.I	IC.," or "LI.C.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Fl copy of the written consent of the managers or managing members adopting the alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")	orida and attach a The alternate name
6. If amending the registered agent and/or registered officer address on our records, enter the management and/or the new registered office address here:	ame of the new
Name of New Registered Agent:	
New Registered Office Address: Enter Florida Street Addr	ess
. Florida	
City	Zip Code
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree to act in this capacity. I further the provisions of all statutes relative to the proper and complete performance of my duties, and accept the obligations of my position as registered agent as provided for in Chapter 605, I document is being filed to merely reflect a change in the registered office address, I hereby conliability company has been notified in writing of this change.	l Lam familiar with F.S. Or, if this

From: Ranae McGraw

e/ Capacity	Name	Address	Type of Actio
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aforementioned ar	ficate, if required; no more than 90 nendment(s), duly authenticated by the law of which this entity is orga	the official having custody of records in the	□Rem

Filing Fee: \$25.00

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID FOX SPORTS NET FLORIDA, LLC', FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO 'DIAMOND SPORTS NET FLORIDA, LLC' ON THE NINETEENTH DAY OF JULY, A.D. 2021, AT 10:14 O'CLOCK A.M.



Authentication: 203732438

Date: 07-21-21