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D	ite: 06/28/202	22	in: DW
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Name:	NBC SPORTS MOBILE	APPS, LLC	
Document #:			
Order #:	14414916		
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Thank you!

Registration Section

TO:

#### **COVER LETTER**

Div	ision of Corporations	
UBJECT:	NBC Sports Mobile Apps, LLC	
		e of Limited Liability Company
`he enclosed Existence, ar	d "Application by Foreign Limited Liability and check are submitted to register the above	Company for Authorization to Transact Business in Florida," Certificate or referenced foreign limited liability company to transact business in Florid
lease return	n all correspondence concerning this matter to	o the following:
	Matthew Sica	
		Name of Person
	NBCUniversal	
		Firm/Company
	100 Universal City Plaza	
		Address
	Universal City, CA 91608	
	C	ity/State and Zip Code
	corporate.secretary@nbcuni.com	
	E-mail address: (to be	e used for future annual report notification)
or further in	nformation concerning this matter, please ca	II:
Jes	ssica Turner	818 299-6290 at ( )
	Name of Contact Person	Area Code Daytime Telephone Number
Re	illing Address: gistration Section	Street Address: Registration Section
	vision of Corporations D. Box 6327	Division of Corporations The Centre of Tallahassee
	llahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Plea	closed is a check for the following amount: ase make check payable to: FLORIDA DEP \$125.00 Filing Fee \$130.00 Filing Fe Certificate of	e & 🔲 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee, Certificate

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

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

L. NBC Sports Mobile Ap						_
(Name of Foreign	Limited Liability Company; must include "Limite	d Liability C	ompany," "L. L.C.," or "L.L.C.,")			
(If name unavailable, enter alternate t	name adopted for the purpose of transacting business in F	orida. The alte	rnate name must include "Limited Liabi	ility Company," "L.I	l. C." or '	ī.l.c ")
Delaware 2.		3				
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	_	(FEI number,	if applicable)		-
4						
	(Date first transacted business in Florida, if prior to (See sections 605 0904 & 605,0905, F.S. to determ	registration ) ine penalty liab	nbty)			
7580 Golf Channel Drive 5.		6.	00 Universal City Plaza			
5. (Street Address of Principal Office)		_	(Mailing Address)			_
Orlando, Florida 32819		Universal City, CA 91608				
					23	
7. Name and street address	ss of Florida registered agent: (P.O. Box	NOT acc	reptable)		92 JUN 2	— - (ज ] स् - (
Name:	C T Corporation System				8 P. <b>K</b>	j l
Office Address:	1200 South Pine Island Road		<del></del>	, — ; , — ;	2: 19	
	Plantation		33324 . Florida			
	(Cuy)		(Zip code)			

#### Registered agent's acceptance:

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 application. 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System

By: Crystle Stevenson, Asst Secretary

Crystle Stevenson, Asst Secretary

(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
■Manager	Name: Kimberley D. Harris	■Manager	Name: Anand Kini
□Member	Address: 30 Rockefeller Plaza	□Member	Address: 30 Rockefeller Plaza
□Authorized	New York, New York 10112	□Authorized	New York, New York 10112
Person		Person	
Other	Other	□Other	□Other
□Manager	Name:	□Manager	Name:
□Member	Address: 100 Universal City Plaza	□Member	Address:
□Authorized	Universal City, CA 91608	□Authorized	Universal City, CA 91608
Person		Person	
■Other	Other	Other Vice Presid	ent Other
□Manager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	Other	Other	Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
- 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, 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.

DocuSigned by:		
Matthew Sica		
AACED3697167414	Signature of an authorized person	
Matthew Sica		
	Typed or printed name of signee	

Page 1

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "NBC SPORTS MOBILE APPS, 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-SEVENTH DAY OF JUNE, A.D. 2022.

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

a version of the second of the

Authentication: 203780621

Date: 06-27-22