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To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614)280-3338  
Fax Number : (614)573-3996

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

Email Address: ct-statecommunications@wolterskluwer.com

Foreign Limited Liability Company  
FOX TELEVISION STATIONS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
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2024 JAN 24 AM 11:58  
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FILED  
2024 JAN 24 PM 4:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

IN COMPLIANCE WITH SECTION 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Fox Television Stations, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC")

2. Delaware 3. 95-4711472  
(Jurisdiction under the law of which foreign limited liability company is organized) (LL number, if applicable)

4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration;  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 10201 W. Pico Blvd. 6. PO Box 900  
(Street Address of Principal Office) (Mailing Address)  
Los Angeles, CA 90064 Beverly Hills, CA 90213

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System  
Office Address: 1200 South Pine Island Road  
Plantation 33324  
(City) (Zip code)  
Florida

## 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.

By: C T Corporation System Jori Sawan Jori Sawan, Assistant Secretary  
(Registered agent's signature)

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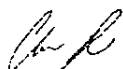
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: <u>Fox Television Holdings, LLC</u>	<input type="checkbox"/> Manager	Name: <u>Christopher S. Reed</u>
<input checked="" type="checkbox"/> Member	Address: <u>10201 W. Pico Blvd.</u>	<input type="checkbox"/> Member	Address: <u>10201 W. Pico Blvd.</u>
<input type="checkbox"/> Authorized	<u>Los Angeles, CA 90064</u>	<input checked="" type="checkbox"/> Authorized	<u>Los Angeles, CA 90064</u>
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: <u>Leonard Fondetto</u>	<input type="checkbox"/> Manager	Name: <u>Michael Nelson</u>
<input type="checkbox"/> Member	Address: <u>1211 Avenue of the Americas</u>	<input type="checkbox"/> Member	Address: <u>10201 W. Pico Blvd.</u>
<input checked="" type="checkbox"/> Authorized	<u>New York, NY 10036</u>	<input checked="" type="checkbox"/> Authorized	<u>Los Angeles, CA 90064</u>
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: <u>Bryant O'Neal</u>	<input type="checkbox"/> Manager	Name: <u>Jeffrey Taylor</u>
<input type="checkbox"/> Member	Address: <u>1211 Avenue of the Americas</u>	<input type="checkbox"/> Member	Address: <u>10201 W. Pico Blvd.</u>
<input checked="" type="checkbox"/> Authorized	<u>New York, NY 10036</u>	<input checked="" type="checkbox"/> Authorized	<u>Los Angeles, CA 90064</u>
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> 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.



Signature of an authorized person

Christopher S. Reed

Typed or printed name of signer

# Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FOX TELEVISION STATIONS, 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 SEVENTEENTH DAY OF JANUARY, A.D. 2024.

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



5777852 8300

SR# 20240150604

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 202610221

Date: 01-17-24