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(Requestor's Name)				
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(Address)				
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(Fiducios)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Susmoss Entity Harrie)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Siling Officer				
Special Instructions to Filing Officer:				

Office Use Only



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		COVER LETTER				
	istration Section sion of Corporations					
SURJECT:	Host Broadcast Services (HBS) 2026 LLC					
00000011		e of Limited Liability Company				
		Company for Authorization to Transact Business in Florida." Certificate of referenced foreign limited liability company to transact business in Florida.				
Please return	all correspondence concerning this matter to	o the following:				
	Philippe Manteau					
	Name of Person					
	Manteau Downes LLP					
		Firm/Company				
	405 Lexington Avenue, 26th floor					
		Address				
	New York, NY 10174					
	C	ity/State and Zip Code				
	msrevault@manteaudownes.com					
	E-mail address: (to be	used for future annual report notification)				
For further in	formation concerning this matter, please cal	lt:				
Mai	rie-Sophie	347 366-1675 at ( ))				
	Name of Contact Person	at ()				
Reg Div	ling Address: gistration Section vision of Corporations	Street Address: Registration Section Division of Corporations The Centre of Tallahassee				

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

Enclosed is a check for the following amount:

Tallahassee, FL 32314

Please make check payable to: FLORIDA DEPARTMENT OF STATE

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

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED HABILITY  $COMPANY TO TRANSACT BUSINESS \ IN THE STATE OF FLORIDA:$ Host Broadcast Services (HBS) 2026 LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," 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," "L. L.C." or "LI.C.") State of Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) (Dute first transacted business in Florida, if prior to registration.) (See sections 605 0904 & 605 0905, F.S. to determine penalty liability) Host Broadcast Services (HBS) 2026 LLC Manteau Downes LLP 6. (Mailing Address) (Street Address of Principal Office) 396 Alhambra Circle, Suite 1050 405 Lexington Ave., 26th floor New York, NY 10174 Coral Gables, Fl. 33134 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee,

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.

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: Host Broadcast Services Inc.	□Manager	Joanna Kukulska Name:
Member	Address:	□Member	Address:
□Authorized	26th floor, New York, NY 10174	■ Authorized	26th floor, New York, NY 10174
Person		Person	<u> </u>
Other	Other	□Other	Other
□Manager	Name: Luc Charial	□Manager	Philippe Manteau Name:
□Member	Address: 405 Lexington Avenue	□Member	Address: 405 Lexington Avenue
■Authorized	26th floor, New York, NY 10174	■ Authorized	26th floor, New York, NY 10174
Person		Person	
□Other	□Other	□Other	□Other
□Manager	Name:	□Manager	Name:
□Member	Address: 405 Lexington Avenue	□Member	Address:
■Authorized	26th floor, New York, NY 10174	□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.

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	Signature of an authorized person	
Philippe Manteau		



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

DELAWARE, DO HEREBY CERTIFY "HOST BROADCAST SERVICES (HBS) 2026

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 NINETEENTH DAY OF DECEMBER, A.D. 2023.



Justicey W. Bullech, Secretary of State

Authentication: 204856425