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Note: DO NOT hit the REFRESH RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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 : (614)573-3996

**Enter the email address for this business entity to be used for future.

legalentities@wbd.com

annual report mailings. Enter only one email address please. **

Email Address:

Foreign Limited Liability Company HBO Latin America Holdings, LLC

Certificate of Status Certified Copy l Page Count 04 Estimated Charge \$2,181,25

Electronic Filing Menu — Corporate Filing Menu

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

IN COMPLIANCE WITH SECTION 605,000E, FLORIDA STATUTEN THE FOLLOWING IS SUBMITTED TO REGISTER A FOREKYN. LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. HBO Latin America He (Name of Foreign	oldings IAC Emited Liability Company; ouist include "Limite	d Leability Compar	٦٠٠٠	" or "11 (* ")			_
(Nimit Or Friedge	anner animy eviluary, min my me Trans	o radiantly Company	, , , , , , ,	, ,			
(It issue massabilité, enter diciniste o	name adopted for the purpose of transacting business of Fl	locida. Che alternate ca	me must on	dule "Linderd Calab	ily Company,""	1. C , TOP	Jido
Delaware 2.		3.					
(Jurisdiction under the law of which foreign limited hability company is organized)		J. 	3				
January 1, 2013							
	Date first transacted business in Florida, Aprilot to (See sections 603 0404 & 603 0403, F.S. to determ	registration) me penalty hapility)					
230 Park Avenue South, 7th Floor		6. (Mailing Admiss)					
(Steret Address of Principal Office)		υ. 	uling Ado: :	\$ < 1			-
New York, NY 10003		New York, NY 10003					
					. <u>22</u>	207	
7. Name and <u>street address</u> of Florida registered agent: (P.O. Box		NOT acceptal	ılc)			4 FEB 2	
Name:	C T Corporation System				S JOAN	9 AM	T
Office Address:	1200 South Pine Island Road				STATE	æ: 53	<u></u>
	Plantation		33324 Florida			_	
	(Cay)			(Zip codz)			

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.

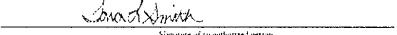


To:

Title or Capacity:	Name and Address:	Title or Canacity;	Name and Address:		
□ Manager	Name: Todd Francis Davis	□Manager	Name: Fraser Martin Woodford		
⊒Member	Address: 230 Park Avenue South	□Member	Address: 230 Park Avenue South		
X Authorized	New York, NY 10003	x Authorized	New York, NY 10003		
Person		Person			
Other		Other			
⊒ Маладет	Name: Tara L. Smith	□Manager	Name:		
⊒Member	Address: 230 Park Avenue South	□Member	Address:		
X Authorized	New York, NY 10003	□Authorized			
Person		Person	The many of the section of the experience of the design of the same of the section of the sectio		
Other	□Other	Other			
⊒Manager	Name:	□Manager	Name:		
Member	Address:	□Member	Address:		
□ Authorized		□Authorized			
Person		Person			
□ Other		□Other	Other		

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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

Tara L. Smith



Page 1

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

DELAWARE, DO HEREBY CERTIFY "HBO LATIN AMERICA HOLDINGS 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 FEBRUARY, A.D. 2024.

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



Jeffrey W. Bluffock, Seccedary of State

Authentication: 202896264