	State of Rhode Office of the Secreta		Fee: \$50.00
	Division Of Business	Services	
148 W. River Street			
Providence RI 02904-2615 (401) 222 2040			
HOPE	(401) 222-30	+0	
Limited Liability Comp Annual Report Filing Period: September 1 -	2		
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR:	2020		
<b>1. ID No.</b> <u>000519510</u>			
2. Exact Name of the Limited Liability Company COX MEDIA, L.L.C.			
3. State of Formation			
State: <u>DE</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online. <u>517919</u>			
4. Brief Description of the	Character of the Business Which	is Actually Conducted	in Rhode Island
<u>COMMUNICATIONS</u>			
5. Principal Office Addres	S		
No. and Street: 1400 L	AKE HEARN DRIVE		
City or Town: <u>ATLA</u>		ate: <u>GA</u> Zip: <u>30319</u>	Country: USA
6. Mailing Address of Lim	ited Liability Company and Name	or Title of Contact Per	son:
Contact Name: Contact T No. and Street: <u>6205-A P</u> City or Town: <u>ATLANTA</u>	EACHTREE DUNWOODY RC		0328Country: USA
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Addre	SS
	First, Middle, Last, Suffix	Address, City or Town, Sta	te, Zip Code, Country
8. RESIDENT AGENT IN R	HODE ISLAND - DO NOT ALTER		

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 6 Day of October, 2020 at 9:28:08 AM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

By <u>LUIS A. AVILA</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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