Commonwealth of Kentucky
Michael G. Adams, Secretary of State

Michael G. Adams
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
(502) 564-3490
http://www.sos.ky.gov

Certificate of Authority

FBE

Pursuant to the provisions of KRS 14A.9 - 030 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements:

1. The entity is a **limited liability company**.

2. The name of the entity is

GV MEDIA SERVICES LLC

3. The name of the entity to be used in Kentucky is

GV MEDIA SERVICES LLC

4. The state or country under whose law the entity is organized is **Florida**.

5. The date of organization is **5/27/2022** and the period of duration is **perpetual**.

6. The mailing address of the entity's principal office is

2741 Taft St Apt 208, Hollywood, FL 33020

7. The name of the initial registered agent is

Jacobo Rispa

and the street address of the entity's initial registered office in Kentucky is

312 S 4th St Ste 700, Louisville, KY 40202

8. The names and business addresses of the entity's representatives:

Registered Agent	Jacobo Rispa	312 S 4th St Ste 700, Louisville, KY 40202
Manager	GIOVANNY BASABE	2741 Taft St Apt 208, Hollywood, FL 33020
Manager	GIOVANNY BASABE	2741 Taft St Apt 208, Hollywood, FL 33020
Authorized Rep	GIOVANNY BASABE	2741 Taft St Apt 208, Hollywood, FL 33020

9. This entity is managed by **Managers**.

10. This application will be effective on **Monday, June 17, 2024**.

I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

Signature of individual signing on behalf of **Authorized Rep:**
GIOVANNY BASABE

I, **Jacobo Rispa**, consent to sign for **Jacob〔**
the Registered Agent on behalf of this entity 〔
2024.