Filing Fee: \$150.00



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Division of Business Services
148 W. River Street
Providence, Rhode Island 02904-2615

M MAR -4 PM S

COMPARATIONS DIVI

### LIMITED LIABILITY COMPANY

### APPLICATION FOR REGISTRATION

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

| •  | <ol> <li>The name of the limited liability co</li> </ol>   | mpany is:                 |                     |                  |                       |  |  |
|----|--|---------------------------|---------------------|------------------|-----------------------|--|--|
|    | PR Newswire Association LLC  | •                         |                     |                  |                       |  |  |
|    | This company has been duly organized in its state of formation as a low-profit limited liability company. (Check box if applicable)  |                           |                     |                  |                       |  |  |
| 2  |  |                           |                     |                  |                       |  |  |
| 3  | 3. The limited liability company is org  | anized under the laws of  | Delaware            |                  |                       |  |  |
| 4  | I. The date of its organization is De  | cember 4, 1996            |                     |                  |                       |  |  |
| 5  | the posted of duration of the limiter  |                           |                     |                  |                       |  |  |
| 6. | The address of the limited liability company's resident agent in Rhode Island is:  |                           |                     |                  |                       |  |  |
|    | 222 Jefferson Boulevard, Suite 200   |                           | Warwick             |                  | 02888                 |  |  |
|    | (Street Address, not P.C   | O. Box)                   | (City/Town          |                  | (Zip Code)            |  |  |
|    | and the name of the resident agent at such address is Corporation Service Company  |                           |                     |                  |                       |  |  |
|    |  |                           |                     | lame of Agent)   |                       |  |  |
| 7. | The secretary of state is appointed the agent of the foreign limited liability company for service of process if at a time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonab diligence. |                           |                     |                  |                       |  |  |
| 8. | limited liability company is organized   | d to be maintained in the | e state or other ju | risdiction under | the laws of which the |  |  |
|    | 350 Hudson Street, Suite 300   |                           |                     |                  |                       |  |  |
|    | New York, NY 10014   |                           |                     |                  |                       |  |  |
| 9. | The mailing address for the limited li   | iability company is:      |                     |                  | <u> </u>              |  |  |
|    | 350 Hudson Street, Suite 300   |                           |                     |                  |                       |  |  |
|    | New York, NY 10014   |                           |                     |                  | <del></del>           |  |  |
| _  | m No. 450<br>vised: 07/12 FILE!  | D 12:06                   |                     |                  |                       |  |  |
|    | MAR 0 4 2  | 2014                      |                     |                  |                       |  |  |

By 2189

| 10   | ).   | Management of the Limited Liability Company (check one only):  |   |  |  |  |
|------|--|--|---|--|--|--|
|      | A.   | The limited liability company is to be No. 11 – DO <u>NOT</u> LIST ANY NAMES   | managed by its members. (If you have checked this box, go to item   |  |  |  |
|      |  |  | <u>or</u>   |  |  |  |
|      | В.   | The limited liability company is to be managed by one (1) or more managers. (If the limited liability company has managers at the time of the filing of these Articles of Organization, state the name and address of each manager.) |   |  |  |  |
|      |  | <u>Manager</u>   | Address   |  |  |  |
|      | Ninan Chacko   |  | 350 Hudson Street, Suite 300, New York, NY 10014  |  |  |  |
|      | Sara Altschul  David Haapaoja  |  | 350 Hudson Street, Suite 300, New York, NY 10014  |  |  |  |
|      |  |  |   |  |  |  |
|      | Mic  | hael A. Russak, Jr.  | 350 Hudson Street, Suite 300, New York, NY 10014 600 Community Drive, Manhasset, NY 11030   |  |  |  |
|      |  | marie Mackerley  |   |  |  |  |
|      | Steve DeLorenzo  |  | 240 West 35th Street, 8th Floor, New York, NY 10001 350 Hudson Street, Suite 300, New York, NY 10014  |  |  |  |
|      |  |  |   |  |  |  |
|      |  | This application is accompanied by a certificate of good standing duly authenticated by the secretary of state or other<br>authorized officer of the jurisdiction under which the foreign limited liability company was organized.   |   |  |  |  |
| 12.  | The  | The date this Application for Registration is to become effective, if later than the date of filing, is:   |   |  |  |  |
|      | (not prior to, nor more than 30 days after, the filing of this Application for Registration) |  |   |  |  |  |
|      |  |  | Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct. |  |  |  |
| Date | . M  | arch 3, 2014   | Annmarie Mackerley  |  |  |  |
|      |  |  | Print Exact Name of Limited Liability Company Making Application  |  |  |  |
|      |  |  | By armain Mackelys  |  |  |  |
|      | Signature of Authorized Person   |  |   |  |  |  |
|      |  |  |   |  |  |  |

# Delaware

PAGE :

### The First State

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

DELAWARE, DO HEREBY CERTIFY "PR NEWSWIRE ASSOCIATION 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 FOURTH DAY OF MARCH, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PR NEWSWIRE ASSOCIATION LLC" WAS FORMED ON THE FOURTH DAY OF DECEMBER, A.D. 1996.

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

2690777 8300

140280468

Jeffrey W Bullock, Secretary of State

AUTHENT CATION: 1174870

DATE: 03-04-14

You may verify this certificate online at corp.delaware.gov/authver.shtml



#### STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

