



State of Rhode Island

Department of State - Business Services Division

Application for Registration

FOREIGN Limited Liability Company

→ Filing Fee: \$150.00

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R.I. DEPT. OF STATE
BUS SVCS DIV

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Pursuant to the provisions of RIGL 7-16-49, 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:

1. The name of the limited liability company is:

Donlen LLC

Is this company organized in its state or country of formation as a low-profit limited liability company? Yes ☐ No ☒

The name, if different, under which it proposes to register and transact business in Rhode Island is:

Donlen of DE LLC

2. The LLC is organized under the laws of: DE

3. The date of its organization is: 11/20/2020

And the period of its duration is: CHECK ONE BOX ONLY

☒ Perpetual (on-going)

☐ Date certain for dissolution _____

4. The name and address of the resident agent/office in Rhode Island is:

Agent Name
C T Corporation System

Street Address (NOT a P.O. Box)
450 Veterans Memorial Parkway, Suite 7A

City/Town
East Providence

State
RHODE ISLAND

Zip Code
02914

5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:

Acquirer of the assets of Donlen Corporation

Check the box to indicate an attachment ☐

MAIL TO:

Division of Business Services

148 W River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov

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FORM 450 - Revised: 08/2020

6. The RI Department of State is appointed the agent of the foreign limited liability company for service of process if, at any time, there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.

7. The address of the office required to be maintained in the state or country of its organization by the laws of that state or, if not so required, of the principal office of the foreign limited liability company is:

3000 Lakeside Drive, 2nd Floor
Bannockburn, IL 60015

8. The mailing address for the limited liability company is:

3000 Lakeside Drive, 2nd Floor
Bannockburn, IL 60015

9. Management of the Limited Liability Company:

The Limited Liability Company is to be managed by: **CHECK ONLY ONE BOX**

☒ By its members (If you have checked this box, go to Section 9. (DO NOT fill out the chart below.)

☐ By one (1) or more managers (List managers below)

MANAGER	ADDRESS

10. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of filing.

11. Date when this application for Certificate of Registration will be effective: **CHECK ONE BOX ONLY**

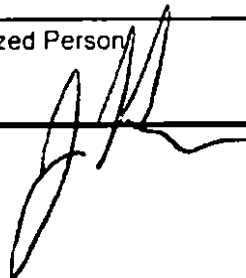
☒ Date received (Upon filing)

☐ Later effective date (Date must be no more than 90 days from the date of filing) _____

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.

Type or Print Name of LLC Donlen LLC	Date 3/30/2021
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Signature of Authorized Person



If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.

FORM 450 - Revised 08/2020

Delaware

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DONLEN 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 THIRTIETH DAY OF MARCH, A.D. 2021.

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



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SR# 20211104877

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

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

Authentication: 202855065

Date: 03-30-21