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## **Application for Transfer of Authority**

FOREIGN Business Corporation, Limited Partnership, Limited Liability Company, Limited Liability Partnership or Non-Profit Corporation



Pursuant to the applicable provisio cation for the purpose of transferrir	ns of RIGL Title $7$ , the under ig its authority to conduct be	ersigned duly qualific ousiness in the State	ed foreign entity submits the following appli- of Rhode Island to:	
1. Entity ID Number:	2. The full name of the entity filing this application is:			
000025310	Nissan North America, Inc.			
3. The applicant is a duly qualified	foreign: (CHECK ONE BO	OX ONLY)		
Limited Liability Company	<b>✓</b> Business	S Corporation	Non-Profit Corporation	
Limited Partnership	Limited L	iability Partnership		
4. The applicant submits this appl	ication for the purpose of tr	ransferring its author	rity to a: (CHECK ONE BOX ONLY)	
Limited Liability Company (RIGL <u>7-16-52.1</u> )  Business Corporation (RIGL <u>7-1.2-1411.1</u> )				
Non-Profit Corporation (RIGL <u>7-6-80.1</u> ) Limited Partnership (RIGL <u>7-13-52.1</u> )				
Limited Liability Partnership	(RIGL <u>Title 7</u> , as applicable	e)		
The date the applicant qualified to conduct business in Rhode Island is:     07/10/1972		The jurisdiction upon transfer of authority is:  Delaware		
7. The name of the entity following	the transfer of authority is	S:		
Nissan North America, Inc				
8. The application for transfer of a	uthority is filed as an accor	mpanying certificate	to the: CHECK ONE BOX ONLY	
Application for registration for	or a Limited Liabilty Compa	iny	-	
Application for certificate of	authority for a Business Co	rporation		
Application for certificate of		orporation		
Certificate of registration for	·			
Notice of registration for a re	· · · · · · · · · · · · · · · · · · ·	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
1			t be accompanied by a Certificate of Good	
Standing/Legal Existence from the current jurisdiction of the entity.				

MAIL TO:

**Division of Business Services**148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: <u>www.sos.ri.gov</u> FILED: TAMP

NOV 1 0 2021 TANY C DIANT

DA. 12:07

FORM 612- Revised: 09/2020

TO BE COMPLETED BY THE ENTITY TRANSFERRING AUTHORITY  Under penalty of perjury, I/we declare and affirm that I/we have examined this Application for Transfer of Authority, including any accompanying attachments, and that all statements contained herein are true and correct and that the undersigned is authorized to sign this certificate on behalf of the entity set forth above.				
Type or Print Name of Limited Liability Company				
Signature of Authorized Person	Date			
Signature of Authorized Person	Date			
Type or Print Name of Corporation				
Nissan North America, Inc.				
Signature of Authorized Person	Date			
	10-15-21			
Signature of Authorized Person	Date			
Type or Print Name of Partnership				
Signature of Partner	Date			
Signature of Partner	Date			
Signature of Partner	Date			
Type or Digit Name of Other Spile.				
Type or Print Name of Other Entity				
Signature of Authorized Person	Date			
Signature of Authorized Person	Date			

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I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island,
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:

November 10, 2021 12:07 PM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

