RI SOS Filing Number: 202331962060 Date: 3/29/2023 12:14:00 PM

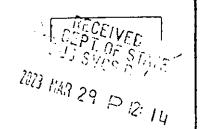


State of Rhode Island

Department of State - Business Services Division

Application for Transfer of Authority

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



cation for the purpose of transferring				
Entity ID Number:	2. The full name of the entity filing this application is:			
001663943	Bonnier Corporation			
3. The applicant is a duly qualified	foreign: (CHECK ONE BO	X ONLY)		
Limited Liability Company	■ Business Corporation ■ Non-Profit Corporation			
Limited Partnership	Limited Liability Partnership			
4. The applicant submits this appl	ication for the purpose of tra	ansferring its authori	ty to a: (CHECK ONE BOX ONLY)	
Limited Liability Company (f	RIGL <u>7-16-52.1)</u>	Business Corporation	on (RIGL <u>7-1.2-1411.1)</u>	
Non-Profit Corporation (RIG		Limited Partnership (RIGL 7-13,1-1009)	or Limited Liability Limited Partnership	
Limited Liability Partnership				
The date the applicant qualified to conduct business in		6. The jurisdiction upon transfer of authority is:		
Rhode Island is: 06/07/16		Delaware		
7. The name of the entity followin	g the transfer of authority is:	:		
Bonnier LLC				
8. The application for transfer of a	uthority is filed as an accon	npanying certificate	to the: CHECK ONE BOX ONLY	
Application for registration for	or a Limited Liabilty Compar	ny		
Application for certificate of	authority for a Business Cor	rporation		
Application for certificate of	authority for a Non-Profit Co	orporation		
Statement of registration for	a Limited Partnership			
Statement of registration for	a registered Limited Liabili	ty Partnership		
8(a). This Transfer of Authority an	id applicable Application/Ce	rtificate/Notice must	be accompanied by a Certificate of Good	
Standing/Legal Existence from th	e current jurisdiction of the	entity.		

Pursuant to the applicable provisions of RIGL Title 7, the undersigned duly qualified foreign entity submits the following appli-

MAIL TO:

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

Phone: (401) 222-3040 Website: www.sos.n.gov **FILED**

MAR 29 2023 YML REHWB BY ML

TO BE COMPLETED BY THE ENTITY TRANSFERRING AUTHORITY Under penalty of perjury, I/we declare and affirm that I/we have examined thing any accompanying attachments, and that all statements contained hereing authorized to sign this certificate on behalf of the entity set forth above.	is Application for Transfer of Authority, includ- n are true and correct and that the undersigned
Type or Print Name of Limited Liability Company	
Bonnier LLC	
Signature of Authorized Person Signature of Authorized Person	Date
	Date
Type or Print Name of Corporation	
Bonnier Corporation	
Signature of Authorized Person	Date 3 28 2023
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 Print Name of Other Entity	
Signature of Authorized Person	Date
Signature of Authorized Person	Date

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.rl.gov.

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I, GREGG M. AMORE, 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:

March 29, 2023 12:14 PM

Gregg M. Amore Secretary of State

Treg M. Coure

