

State of Rhode Island Office of the Secretary of State

Fee: \$150.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

Foreign Limited Liability Company Application for Registration

(Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended)

ARTICLE I

The name of the limited liability company is: INFORMA CONNECT USA LLC

Enter your name exactly as it appears in your state. If your name includes an entity ending other than LLC or Limited Liability Company, complete Article II. The elected name in RI must include the entity ending LLC or Limited Liability Company.

ARTICLE II

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

ARTICLE III

The Limited Liability Company is organized under the laws of: State: <u>DE</u> Country: <u>US</u>

The date this Application for Registration is to become effective, not prior to, nor more than 90 days after the filing of this Application for Registration.

Later Effective Date:

ARTICLE IV

The date of its organization is: $\frac{4/30/2024}{}$

ARTICLE V

The period of its duration is: X Perpetual

ARTICLE VI

The address (post office box not acceptable) of the limited liability company's resident agent in Rhode Island:

No. and Street: 222 JEFFERSON BOULEVARD

SUITE 200

City or Town: WARWICK State: RI Zip: 02888

Name: <u>CORPORATION SERVICE COMPANY</u>

Article VII

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

CONFERENCES

ARTICLE VIII

The Rhode Island 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.

ARTICLE IX

The address of the office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized:

No. and Street: <u>605 3RD AVENUE, 22ND FL</u>

City or Town: NEW YORK State: NY Zip: 10158 Country: US

ARTICLE X

The mailing address for the limited liability company is:

No. and Street: 1983 MARCUS AVENUE, STE. 250

City or Town: NEW HYDE PARK State: NY Zip: 11042 Country: US

ARTICLE XI

The limited liabilty company is to be managed by its ___ Members* or __X Managers (check one)

* If you checked to be managed by your MEMBERS (*the owners*) DO NOT complete the following section. <u>Only</u> complete the following section if you checked to be managed by MANAGERS.

The name and address of each manager:

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	SHEIKH SHAGHAF	605 3RD AVENUE, 22ND FL NEW YORK, NY 10158 US
MANAGER	ANDREW MULLINS	240 BLACKFRIARS ROAD LONDON, SE18BU UK
MANAGER	BRIAN VASANDANI	605 3RD AVENUE, 22ND FL NEW YORK, NY 10158 US

This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of periury, that this instrument is

that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

Signed this 22 Day of August, 2024 at 3:36:25 PM by the Authorized Person.

PATRICIA PETER

Form No. 450 Revised 09/07

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Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INFORMA CONNECT USA 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 FOURTEENTH DAY OF JUNE, A.D. 2024.

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

3331027 8300 SR# 20242870467



Authentication: 203710166

Date: 06-14-24