

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
KY Secretary of State  
Received and Filed

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Fee receipt: \$90.00

Michael G. Adams  
Secretary of State  
P. O. Box 718  
Frankfort, KY 40602-0718  
(502) 564-3490  
<http://www.sos.ky.gov>

Certificate of Authority

FBE

Pursuant to the provisions of KRS 14A.9 - 030 the undersigned hereby applies for authority to transact business in Kentucky on behalf of the entity named below and, for that purpose, submits the following statements.

1. The business entity is a **limited liability company**.
2. The name of the entity is: **NYRA CONTENT MANAGEMENT SOLUTIONS, LLC**
3. The state or country whose law the entity is organized is **Delaware**.
4. The date of organization is **1/25/2019** and the period of duration is **perpetual**.  
This Filing is Effective on Wednesday, February 21, 2024
5. This entity is managed by Managers

**6. Principal Office**

110-00 Rockaway Blvd.  
Jamaica, NY 11417

**7. Required Representatives**

<b>Manager</b>	Melanie Sims Frank	110-00 Rockaway Jamaica Blvd	NY	11417
<b>Manager</b>	David O'Rourke	110-00 Rockaway Jamaica Blvd.	NY	11417
<b>Manager</b>	Antoine Allevato	110-00 Rockaway Jamaica Blvd.	NY	11417

**8. Registered Agent/Office**

National Registered Agents, Inc.  
306 W. Main Street  
Suite 512  
Frankfort, KY 40601

I, **Tina Lipko**, consent to sign for **National Registered Agents, Inc.** who serves as the **Registered Agent** on behalf of this Entity.  
on Wednesday, February 21, 2024

As the Authorized Representative, I, **Melanie Sims Frank**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Manager**