

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000005302

Entity Name: KLARNA INC.**Current Principal Place of Business:**629 N. HIGH STREET, SUITE 300
COLUMBUS, OH 43215**Current Mailing Address:**629 N. HIGH STREET, SUITE 300
COLUMBUS, OH 43215 US**FEI Number:** 99-0365994**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title SECRETARY, VP, DIRECTOR
Name TONER, DEANA
Address 629 N. HIGH ST., SUITE 300
City-State-Zip: COLUMBUS OH 43215

Title PRESIDENT, DIRECTOR
Name SYKES, DAVID
Address 629 N. HIGH ST., SUITE 300
City-State-Zip: COLUMBUS OH 43215

Title TREASURER
Name OLSSON, ALEXANDER
Address 629 N. HIGH STREET, SUITE 300
City-State-Zip: COLUMBUS OH 43215

Title DIRECTOR
Name FERST, RACHEL
Address 629 N. HIGH ST., SUITE 300
City-State-Zip: COLUMBUS OH 43215

Title CHIEF COMPLIANCE OFFICER
Name SPENCER, TIMOTHY
Address 629 N. HIGH ST., SUITE 300
City-State-Zip: COLUMBUS OH 43215

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TIMOTHY SPENCERCHIEF COMPLIANCE
OFFICER

04/12/2021

Electronic Signature of Signing Officer/Director Detail_____
Date