

**2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M05000003803

**Entity Name:** NYT GROUP SERVICES, LLC

**Current Principal Place of Business:**

620 EIGHTH AVENUE, 18TH FLOOR  
NEW YORK, NY 10018

**Current Mailing Address:**

620 EIGHTH AVENUE, 18TH FLOOR  
NEW YORK, NY 10018

**FEI Number:** 06-1619167

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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

**Authorized Person(s) Detail :**

Title MGRM  
Name THE NEW YORK TIMES COMPANY  
Address 620 EIGHTH AVENUE, 18TH FLOOR  
City-State-Zip: NEW YORK NY 10018

Title PS  
Name RICHIERI, KENNETH A  
Address 620 EIGHTH AVENUE  
City-State-Zip: NEW YORK NY 10018

Title SVP  
Name FOLLO, JAMES M  
Address 620 EIGHTH AVENUE  
City-State-Zip: NEW YORK NY 10018

Title T  
Name EMHOFF, LAURENA L  
Address 620 EIGHTH AVENUE  
City-State-Zip: NEW YORK NY 10018

Title ASST. TREASURER  
Name SHORT, RANDALL K.  
Address 620 EIGHTH AVENUE, 18TH FLOOR  
City-State-Zip: NEW YORK NY 10018

Title ASSISTANT SECRETARY  
Name BRAYTON, DIANE  
Address 620 EIGHTH AVENUE, 18TH FLOOR  
City-State-Zip: NEW YORK NY 10018

Title VP  
Name BENTEN, R. A.  
Address 620 EIGHTH AVENUE, 18TH FLOOR  
City-State-Zip: NEW YORK NY 10018

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KENNETH A. RICHIERI

**SECRETARY**

**02/26/2015**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date