

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

L902

1420801.06
Michael G. Adams
Secretary of State
Received and Filed
1/10/2025 12:00:00 AM
Fee receipt: \$90

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 entity is a **limited liability company**.

2. The name of the entity is

Criterion Newco LLC

3. The name of the entity to be used in Kentucky is

Criterion Newco LLC

4. The state or country under whose law the entity is organized is **New York**.

5. The date of organization is **5/13/2024** and the period of duration is **perpetual**.

6. The mailing address of the entity's principal office is

250 East Hartsdale Avenue, Hartsdale, NY 10530

7. The name of the initial registered agent is

Gary Lewis

and the street address of the entity's initial registered office in Kentucky is

300 Omicron Ct, Shepherdsville, KY 40165

8. The names and business addresses of the entity's representatives:

Registered Agent	Gary Lewis	300 Omicron Ct, Shepherdsville, KY 40165
Authorized Rep	Gary Lewis	250 East Hartsdale Avenue, Hartsdale, NY 10530

9. This entity is managed by **Members**.

10. This filing will be effective on **Friday, January 10, 2025**.

This entity is **NOT** a tobacco retailer as defined by KRS 438.305(9).

I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

Signature of individual signing on behalf of **Authorized Rep: Gary Lewis**

I, **Gary Lewis**, consent to sign for **Gary Lewis**
Registered Agent on behalf of this entity on 1/10/2025.

1420801.06**Michael G. Adams****Secretary of State**

Received and Filed

1/10/2025 12:00:00 AM**Fee receipt: \$90**