

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

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

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Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Certificate ((Foreign Busin	of Authority ess Entity)		FBE
Pursuant to the provisions of KRS 14A –		for authority to transact	business in Kentucky o	n behalf of the entity named below
limited partnership		orporation lity company tive association Il service corporation	professional lin statutory trust other	nited liability company
(The n	ame must be identical to the name	on record with the Sec	cretary of State.)	*
3. The name of the entity to be used in h	Kentucky is (if applicable):(Only pr	ovide if "real name" is	unavailable for use; of	therwise, leave blank.)
4. The state or country under whose law		entroy/accessor (10) Vertical professional Maria		Paraktino i Paraktin in Loantino Provincio Paraktino Provincio Paraktino Par
5. The date of organization is $01/26/20$	12	and the period of durati	on is perpetual	
6. The mailing address of the entity's pri	ncinal office is		(If left blank, duration	n is considered perpetual.)
400 Continental Blvd, Ste. 500	noipar office to	El Segundo	CA	90245
Street Address		City	State	Zip Code
7. The street address of the entity's regis	stered office in Kentucky is			
306 W. Main Street, Suite 512,	patri	Frankfort	KY	40601
Street Address (No P.O. Box Numbers	(a)	City	Stat	te Zip Code
and the name of the registered agent at t	hat office is National Registered A	Agents, Inc.		
8. The names and business addresses of	of the entity's representatives (secreta	rv. officers and directors	. managers, trustees or	general partners):
				90245
CONTRACTOR OF CONTRACTOR OF CONTRACTOR	400 Continental Blvd, Ste. 500 Street or P.O. Box	El Segundo City	CA State	Zip Code
George Doyle	400 Continental Blvd, Ste. 500	El Segundo	CA	90245
	Street or P.O. Box	City	State	Zip Code
Daniel Parsons	400 Continental Blvd, Ste. 500	El Segundo	CA	90245
	Street or P.O. Box	City	State	Zip Code
*See attached 9. If a professional service corporation, a and treasurer are licensed in one or more statement of purposes of the corporation	e states or territories of the United Sta			
10. I certify that, as of the date of filing th	is application, the above-named entit	y validly exists under the	laws of the jurisdiction of	of its formation.
11. If a limited partnership, it elects to be	a limited liability limited partnership.	Check the box if applica	able:	
12. If a limited liability company, check	box if manager-managed:			
13. This application will be effective upon	ı filing.			
/s/Josef Bobek	Josef	Bobek - Manager	2/10	0/2023
Signature of Authorized Representative		Printed Name & Title		Date
National Registered Agents, Inc. Type/Print Name of Registered Agent	, сог	nsent to serve as the reg	istered agent on behalf	of the business entity.
Dur Day M	Joe Davis	12	Asst. Secretary	2/10/2023
Signature of Registered Agent	Printed Name		Title	Date
Signature of Registered Agent	r inted Haine			Date

Management Attachment - Additional Managers & Members:

Arthur P. Brazy, Jr - Manager - 400 CONTINENTAL BLVD STE 500, EL SEGUNDO, CA 90245

Todd Ruggiero - Manager - 400 CONTINENTAL BLVD STE 500, EL SEGUNDO, CA 90245

LD Acquisition Company 12 LLC - Member - 400 CONTINENTAL BLVD STE 500, EL SEGUNDO, CA 90245