

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
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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: **EVERGLADES FINANCIAL COMPANY, LLC**
3. The state or country whose law the entity is organized is **Florida**.
4. The date of organization is **6/29/2021** and the period of duration is **perpetual**.
This Filing is Effective on Tuesday, April 30, 2024
5. This entity is managed by Members

6. Principal Office

5151 S. Lakeland Drive
Suite 5
Lakeland, FL 33813

7. Required Representatives

Member	AECW Holdings LLC	PO Box 7411	Lakeland	FL	33807
Member	Jeremy Wharton	PO Box 7411	Lakeland	FL	33807

8. Registered Agent/Office

Registered Agents Inc.
212 N. 2nd St
Suite 100
Richmond, KY 40475

I, **David Roberts, Assistant Secretary**, consent to sign for **Registered Agents Inc.** who serves as the **Registered Agent** on behalf of this Entity.
on Tuesday, April 30, 2024

As the Authorized Representative, I, **Jeremy Wharton**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **MGR**