

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

Michael G. Adams  
Secretary of State  
P. O. Box 718  
Frankfort, KY 40602-0718  
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Certificate of Authority

FBE

L902  
1428304.06  
Michael G. Adams  
Secretary of State  
Received and Filed  
2/7/2025 12:00:00 AM  
Fee receipt: \$90

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

**BRASS RING PARTNERS LLC**

3. The state or country under whose law the entity is organized is **California**.

4. The date of organization is **6/17/2019** and the period of duration is **perpetual**.

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

**248 3rd St #494, Oakland, CA 94607**

6. The name of the initial registered agent is

**Registered Agents Inc**

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

**212 N. 2nd St. STE 100, Richmond, KY 40475**

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

<b>Manager</b>	Radical Sales MBE	145 Pine Haven Shores Rd, #1000A, Shelburne, VT 05482
<b>Organizer</b>	Radical Sales MBE	145 Pine Haven Shores Rd, #1000A, Shelburne, VT 05482
<b>Manager</b>	Global Hemp Growers MBE	145 Pine Haven Shores Rd, #1000A, Shelburne, VT 05482
<b>Organizer</b>	Global Hemp Growers MBE	145 Pine Haven Shores Rd, #1000A, Shelburne, VT 05482

8. This entity is managed by **Managers**.

9. This filing will be effective on **Friday, February 7, 2025**.

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 **President: Sean**

**Donahoe**

I, **David Roberts**, consent to sign for **Regis**  
who serves as the Registered Agent on beha  
Friday, February 7, 2025.

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