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Michael G. Adams Kentucky Secretary of State Received and Filed:

8/31/2023 2:57 PM Fee Receipt: \$90.00



COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov		Certificate of Authority (Foreign Business Entity)		FBE
Pursuant to the provisions of KRS 1 and, for that purpose, submits the fo		reby applies for authority to transact bus	siness in Kentucky on b	ehalf of the entity named below
The entity is a: X profit cor	rporation	nonprofit corporation	professional limite	d liability company
business	trust	limited liability company	statutory trust	
limited p	artnership	Itd cooperative association	public benefit corp	oration
non-prof		professional service corporation	other	
z. The ham of the charty to	rcrombie & Fitch Mana		(0, 1,)	·
10 to		to the name on record with the Secret	ary of State.)	
3. The name of the entity to be use	d in Kentucky is (if applicable)	(Only provide if "real name" is una	available for use: other	wise leave blank.)
4. The state or country under whose	e law the entity is organized is	4	valiable for use, outer	wise, leave blanks,
5. The date of organization is01/	STATE STATE OF A STATE OF THE S	and the period of duration i	s	
-		(1	f left blank, duration is	considered perpetual.)
The mailing address of the entity 6301 Fitch Path	's principal office is	New Albany	Ohio	43054
Street Address		City	State	Zip Code
7. The street address of the entity's	registered office in Kentucky	is		
306 W. Main Street, Suite 512		Frankfort	KY	40601
Street Address (No P.O. Box Num		City	State	Zip Code
and the name of the registered ager	nt at that office is CTCorp	oration System		
		ives (secretary, officers and directors, m	anagers, trustees or ger	neral partners):
see attached spreadsh	neet			
Name	Street or P.O. Box	City	State	Zip Code
Name	Street or P.O. Box	City	State	Zip Code
Name	Street or P.O. Box	City	State	Zip Code
9. If a professional service corporation	more states or territories of the	ers, not less than one half (1/2) of the dir e United States or District of Columbia to		
10. I certify that, as of the date of	filing this application, the above	ve-named entity validly exists under the l	aws of the jurisdiction o	f its formation.
11. If a limited partnership, it elec-	ts to be a limited liability limite	d partnership. Check the box if applicab	ole:	
If a limited liability company,	, check box if manager-man	aged:		
This application will be effective	ve upon filing.			
9346		Gregory Jenner Henchel	08/2	2/2023
Signature of Authorized Repres	sentative	Printed Name & Title		Date
Type/Print Name of Registered Ager	nt			
By: SCT Corporation	She	erry McGinnes Assista	ant Secretary	8/30/2023

Entity Name: Abercrombie & Fitch Management Co.

Name	Title	Title Role	Business Address	
Gallagher, Jr. Everett E.	Director	Director	6301 Fitch Path, New Albany OH 43054	
Henchel, Gregory Jenner	Director	Director	6301 Fitch Path, New Albany OH 43054	
Gallagher, Jr. Everett E.	Senior Vice President & Treasurer	Officer	6301 Fitch Path, New Albany OH 43054	
Gupta, Mohit	Assistant Treasurer and Assistant Secretary	Officer	6301 Fitch Path, New Albany OH 43054	
Henchel, Gregory Jenner	Executive Vice President, General Counsel and Corporate Secretary	Officer	6301 Fitch Path, New Albany OH 43054	
Horowitz, Fran	Chief Executive Officer & President	Officer	6301 Fitch Path, New Albany OH 43054	
Lipesky, Scott	Executive Vice President, Chief Financial Officer and Chief Operating Officer		6301 Fitch Path, New Albany OH 43054	
Logsdon, Jeremy	Secretary	Officer	6301 Fitch Path, New Albany OH 43054	
McIntyre, Christina	Assistant Secretary	Officer	6301 Fitch Path, New Albany OH 43054	