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Michael G. Adams

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	MICHAEL G. ADAMS		ATE	Kentucky Secret Received and Fil 2/7/2023 2:51 PM Fee Receipt: \$90	ed: A
Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Certificate ((Foreign Busin	of Authority less Entity)		FBE	
Pursuant to the provisions of KRS 14A and, for that purpose, submits the follow 1. The entity is a:	ving statements:	al a		onal limited liability co	
Iimited partn non-profit llo 2. The name of the entity is <u>Ready Re</u>	hership Itd coopera	tive association	other		
(The	name must be identical to the name	on record with the Secret	tary of State.)		
 The name of the entity to be used in The state or country under whose la The date of organization is <u>January</u> 	(Only pr w the entity is organized is Delaware	rovide if "real name" is un and the period of duration		use; otherwise, leav	e blank.)
		_and the period of duration (lf left blank, d	uration is considered	ed perpetual.)
6. The mailing address of the entity's p 2505 N. Oakland Avenue Street Address	principal office is	Milwaukee City	WI State	5321 Zip Cod	
7. The street address of the entity's reg 306 W. Main Street, Suite 512,		Frankfort	KY		40601
Street Address (No P O Box Number	rs	City		State	Zip Code
Street Address (No P.O. Box Number and the name of the registered agent at	t that office is <u>C T Corporation Syst</u>			State	Zip Code
and the name of the registered agent a 3. The names and business addresses	t that office is <u>C T Corporation Syst</u> s of the entity's representatives (secreta	em ary, officers and directors, m		ees or general partne	
and the name of the registered agent a 3. The names and business addresses David Reeves	t that office is <u>C T Corporation Syst</u> s of the entity's representatives (secreta 2505 N. Oakland Avenue	ary, officers and directors, m Milwaukee	nanagers, trust	ees or general partne	ers):
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