

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: **GRATZ PARK PRIVATE WEALTH ASHEVILLE LLC**
3. The state or country whose law the entity is organized is **North Carolina**.
4. The date of organization is **12/5/2023** and the period of duration is **perpetual**.
5. This entity is managed by Managers

6. Principal Office

82 Patton Ave
Suite 610
Asheville, NC 28801

7. Required Representatives

Member	Sherry Denise Holley	331 S. Mill St.	Lexington	KY	40508
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8. Registered Agent/Office

Sherry Denise Holley
331 S. Mill St.
Lexington, KY 40508

I, **Sherry Denise Holley**, consent to serve as the **Registered Agent** on behalf of this Entity.
on Tuesday, January 2, 2024

As the Authorized Representative, I, **Sherry Denise Holley**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Member**