

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
Secretary of State
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Michael G. Adams
Secretary of State
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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 entity is a **profit corporation**.

2. The name of the entity is

LEE SUPPLY CORP

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

4. The date of organization is **10/9/1973** and the period of duration is **perpetual**.

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

6610 Guion Rd, Indianapolis, IN 46268

6. The name of the initial registered agent is

SKO-Louisville Services, LLC

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

400 W. Market Street, Suite 2700, Louisville, KY 40202

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

Officer Charles Lee 6610 Guion Rd, Indianapolis, IN 46268

8. This filing will be effective on **Monday, January 27, 2025**.

This entity is **NOT** a tobacco retailer as defined by KRS 438.305(9).

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 **Officer: Charles Lee**

I, **SKO-Louisville Services, LLC**, consent to sign for **SKO-Louisville Services, LLC** who serves as the Registered Agent on behalf of this entity on Monday, January 27, 2025.