

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: **LOGISTIX PROPERTY GROUP**
3. The name of the entity to be used in Kentucky is (if applicable): **LOGISTIX PROPERTY GROUP LLC**
4. The state or country whose law the entity is organized is **Ohio**.
5. The date of organization is **6/12/2012** and the period of duration is **perpetual**.  
This Filing is Effective on Monday, February 12, 2024
6. This entity is managed by Members

**7. Principal Office**

11339 Avant Ln  
Cincinnati, OH 45249

**8. Required Representatives**

<b>Member</b>	Douglas Swain	11339 Avant Ln	Cincinnati	OH	45249
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**9. Registered Agent/Office**

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

I, **David Roberts**, consent to serve as the **Registered Agent** on behalf of this Entity.  
on Monday, February 12, 2024

As the Authorized Representative, I, **Douglas J Swain**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **President**