

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

L902

1398208.06
Michael G. Adams
Secretary of State
Received and Filed
9/27/2024 12:00:00 AM
Fee receipt: \$90

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 entity is a **limited liability company**.

2. The name of the entity is

Rent A Cop

3. The name of the entity to be used in Kentucky is

RENT A COP LLC

4. The state or country under whose law the entity is organized is **California**.

5. The date of organization is **3/25/2024** and the period of duration is **perpetual**.

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

6020 SEABLUFF DR UNIT 122, LOS ANGELES, CA 90094

7. The name of the initial registered agent is

Brooklen Bruce

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

1795 Alysheba Way Ste 7202 PMB 135238, Lexington, KY 40509

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

Manager	Brooklen Bruce	6020 SEABLUFF DR, LOS ANGELES, CA 90094
Organizer	Brooklen Bruce	6020 SEABLUFF DR, LOS ANGELES, CA 90094

9. This entity is managed by **Managers**.

10. This filing will be effective on **Friday, September 27, 2024**.

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 **Manager: Brooklen Bruce**

I, **Brooklen Bruce**, consent to serve as the Registered Agent on
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behalf of this entity on Friday, September 27

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