

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
Received and Filed

6/23/2023 6:08:12 PM

Fee receipt: \$90.00

Michael G. Adams
Secretary of State
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Frankfort, KY 40602-0718
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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 business entity is a **limited liability company**.
2. The name of the entity is: **DELTA FLEX PARTNERS, LLC**
3. The name of the entity to be used in Kentucky is (if applicable): **N/A**
4. The state or country whose law the entity is organized is **Texas**.
5. The date of organization is **1/1/2012** and the period of duration is **perpetual**.
6. This entity is managed by Managers

7. Principal Office

3100 Olympus Blvd
Suite 500
Coppell, TX 75019

8. Required Representatives

Manager	Takashi Kimiwada	1224 NW 15th St	Boca Raton	FL	33486
Manager	Hirofumi Yamamoto	3204 Deep Springs Dr	Plano	TX	75025

9. Registered Agent/Office

Corporation Service Company
421 West Main Street
Frankfort, KY 40601

I, **Alix Anast, Assistant Secretary**, consent to sign for **Corporation Service Company** who serves as the **Registered Agent** on behalf of this Entity.
on Friday, June 23, 2023

As the Authorized Representative, I, **Hirofumi Yamamoto**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **CFO**