Commonwealth of Kentucky Michael G. Adams, 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 entity is a **limited liability company**.
- 2. The name of the entity is

KATMAI GOVERNMENT SERVICES, LLC

- 3. The state or country under whose law the entity is organized is **Alaska**.
- 4. The date of organization is **2/5/2007** and the period of duration is **perpetual**.
- 5. The mailing address of the entity's principal office is

11001 O'Malley Centre Dr, Suite 204, Anchorage, AK 99515

6. The name of the initial registered agent is

Corporation Service Company

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

421 West Main Street, Frankfort, KY 40601

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

Member

Ouzinkie Native

11001 O'Malley Centre Dr, Suite 204,

Corporation

ANCHORAGE, AK 99515

- 8. This entity is managed by **Members**.
- 9. This application will be effective on Thursday, May 30, 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 **Member: Cynthia Vanden Berg**

I, **Jawann Latney**, consent to sign for **Corporation Service Company** who serves as the Registered Agent on behalf of this entity on Thursday, May 30, 2024.