# **Commonwealth of Kentucky** Michael G. Adams, Secretary of State

1377112.06 Michael G. Adams Secretary of State Received and Filed 7/8/2024 12:00:00 AM

**FBE** 

L902

Fee receipt: \$90 **Certificate of Authority** 

Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

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

#### SERVD LLC

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

### **SERVD LLC**

- 4. The state or country under whose law the entity is organized is **Wisconsin**.
- 5. The date of organization is 6/28/2021 and the period of duration is perpetual.
- 6. The mailing address of the entity's principal office is

## 4005 Felland Rd Ste 110, Madison, WI 53718

7. The name of the initial registered agent is

## Registered Agent

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

## 212 N 2nd St, Richmond, KY 40475

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

Registered Agent	Registered Agent	212 N 2nd St, Richmond, KY 40475
Authorized Rep	Kis Strategies	2525 E Crawford Ave, Saint Francis, WI 53235
Authorized Rep	Adam Benyo	2525 E Crawford Ave, Saint Francis, WI 53235

- 9. This entity is managed by **Members**.
- 10. This application will be effective on Monday, July 8, 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 Authorized Rep: Adam Benyo

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l, **Adam Benyo**, consent to sign for **Registe** serves as the Registered Agent on behalf of July 8, 2024.

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