

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
Secretary of State  
Received and Filed  
9/17/2024 12:00:00 AM  
Fee receipt: \$90

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Secretary of State  
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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 entity is a **profit corporation**.

2. The name of the entity is

**RAWYALTY APPAREL INC**

3. The state or country under whose law the entity is organized is **Florida**.

4. The date of organization is **9/17/2024** and the period of duration is **perpetual**.

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

**501 NE 189th St, Miami, FL 33179**

6. The name of the initial registered agent is

**Shlomo Asayag**

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

**501 NE 189th St, Adams, KY 41201**

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

**Officer** Shlomo Asayag 501 NE 189th St, Miami, FL 33179

8. This filing will be effective on **Tuesday, September 17, 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 **President: Shlomo Asayag**

I, **Shlomo Asayag**, consent to serve as the Registered Agent on behalf of this entity on Tuesday, September 17, 2024.