



COMMONWEALTH OF KENTUCKY
ELAINE N. WALKER, SECRETARY OF STATE

Division of Business Filings
Business Filings
PO Box 718
Frankfort, KY 40602
(502) 564-3490
www.sos.ky.gov

Statement of Consent of Registered Agent
(Domestic or Foreign Business Entity)

CRA

Pursuant to the provisions of KRS 14A and KRS Chapter 271B, 273, 274, 275, 362 or 386, the undersigned applicant consents to act as registered agent on behalf of the business entity named below and, for that purpose, submits the following statements:

1. The business entity is

☐
☒
☐
☐
☐

a corporation (KRS 271B, KRS 273 or KRS 274)
a limited liability company (KRS 275)
a limited partnership (KRS 362)
a limited liability partnership (KRS 362)
a business trust (KRS 386)

2. The name of the business entity is 883 EAGLES LANE, LLC

3. The state or country of incorporation, organization or formation is KENTUCKY

4. The name of the initial registered agent is Incorp Services, Inc.

5. The street address of the registered office address in Kentucky is:

828 LANE ALLEN RD SUITE SUITE 219 LEXINGTON KENTUCKY 40504

Street Address (No Post Office Box Numbers)

City

State

Zip Code

6. This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is

(Delayed effective
date and/or time)

I declare under penalty of perjury under the laws of Kentucky that the foregoing is true and correct.

Lindsay Lawai
Signature of Registered Agent

Printed Name

Authorized Person
Title