Commonwealth of Kentucky Michael G. Adams, Secretary of St.

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Michael G. /.......
KY Secretary of State
Received and Filed

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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

RCA

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 nonprofit corporation.
- 2. The name of the entity is: NFO, INC.
- 3. The name of the entity to be used in Kentucky is (if applicable):
- 4. It is an entity organized and existing under the laws of the state of lowa.
- 5. The date of organization is See Original Certificate of Authority. and the period of duration is perpetual

Principal Office

528 Billy Sunday Road, P.O. Box 2508 AMES, IA 50010

Registered Agent Name/Address

C T CORPORATION SYSTEM 306 W MAIN ST SUITE 512 FRANKFORT, KY 40601

- 6. As the Authorized Representative, I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. David P Reed on 5/24/2022
- 7. As the Registered Agent, I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. C T CORPORATION SYSTEM on 5/24/2022