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**

1241115 1241115 Michael G. /...... KY Secretary of State Received and Filed 10/11/2023 12:00:00 AM Fee receipt: \$104.00

RCA

## ritv

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 limited liability company.
- 2. The name of the entity is: SMOKERS WHOLESALE LLC
- 3. The name of the entity to be used in Kentucky is (if applicable): SMOKERS WHOLESALE LLC
- 4. It is an entity organized and existing under the laws of the state of Indiana.
- 5. The date of organization is 9/26/2022 and the period of duration is perpetual

## **Principal Office**

2668 CHARLESTOWN RD BUILDING B 2668 CHARLESTOWN RD BUILDING B NEW ALBANY, IN 40206

## Registered Agent Name/Address

CHIRAG PATEL 1401 Lexington Rd 1401 Lexington Rd Louisville, KY 40206

6. CHIRAG PATEL, PRESIDENT, on 10/11/2023

7. I, CHIRAG PATEL, consent to serve as the registered agent on behalf of the this entity on 10/11/2023