

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

1298115 1298115

Michael G. Adams  
KY Secretary of State  
Received and Filed

7/31/2023 6:00:51 PM

Fee receipt: \$90.00

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

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 business entity is a **limited liability company**.
2. The name of the entity is: **CASTELLAN SOLUTIONS LLC**
3. The name of the entity to be used in Kentucky is (if applicable): **N/A**
4. The state or country whose law the entity is organized is **Ohio**.
5. The date of organization is **9/1/2005** and the period of duration is **perpetual**.
6. This entity is managed by Members

**7. Principal Office**

800 Adams Avenue  
Audubon, PA 19403

**8. Required Representatives**

<b>Member</b>	James Wetekamp	800 Adams Avenue	Audubon	PA	19403
---------------	----------------	------------------	---------	----	-------

**9. Registered Agent/Office**

Legalinc Corporate Services Inc.  
9900 Corporate Campus Drive Suite 3000  
Louisville, KY 40223

I, **Dana Case, Manager of Legalinc Corporate Services Inc.**, consent to sign for **Legalinc Corporate Services Inc.** who serves as the **Registered Agent** on behalf of this Entity.  
on Monday, July 31, 2023

As the Authorized Representative, I, **James Wetekamp**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Member**