# **Commonwealth of Kentucky** Michael G. Adams, Secretary of State

1388115.09 Michael G. Adams Secretary of State Received and Filed

8/19/2024 12:00:00 AM

Fee receipt: \$90

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** 

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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

## American Demolition & Nuclear Decommissioning, Inc.

3. The name of the entity to be used in Kentucky is

## American Demolition & Nuclear Decommissioning, Inc.

- 4. The state or country under whose law the entity is organized is **New York**.
- 5. The date of organization is 1/24/2004 and the period of duration is perpetual.
- 6. The mailing address of the entity's principal office is

## Po Box 553, Grand Island, NY 14072

7. The name of the initial registered agent is

#### Blake Schaab

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

#### 306 W Main St Ste 512, Frankfort, KY 40601

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

Registered Agent	Blake Schaab	306 W Main St Ste 512, Frankfort, KY 40601
Authorized Rep	Linda Pauly	Po Box 553, Grand Island, NY 14072
CFO	Blake Schaab	Po Box 553. Grand Island, NY 14072

9. This filing will be effective on Monday, August 19, 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 Authorized Rep: Linda **Pauly** 

I, Blake Schaab, consent to sign for Blake Schaab who serves

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as the Registered Agent on behalf of this ent 19, 2024.

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