

COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

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Michael G. Adams Kentucky Secretary of State Received and Filed: 2/6/2025 12:15 PM Fee Receipt: \$40.00

Date

Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Amended Certificate of Authority (Foreign Business Entity)	FCA
	s of KRS Chapter KRS 14A.9 - 040 the undersigned he entity named below and, for that purpose, submits the fol	
1. The business entity is:	profit corporation professional service corporation limited liability company professional limited liability company limited cooperative association other	nonprofit corporation. business trust limited partnership statutory trust non-profit LLC
2. The name of the compa	ny is: Render Capital Fund 2 GP, LLC	.
	(The name must be identical to the name on record	-
3. It is an entity organized	and existing under the laws of the state or country of $\frac{De}{C}$	elaware
4. The entity received auth	nority to transact business in Kentucky on	·
5. The entity has changed	its (check all that apply)	
Domicile r	Domicile name to Render Capital Fund 1 GP, LLC	
✓ Name to b	Name to be used in Kentucky to Render Capital Fund 1 GP, LLC	
	Jurisdiction of organization to	
Period of o	Period of duration perpetual	
☐ Form of or	Form of organization	
✓ Managem	ent type:	nager managed
6. This application will be e	effective upon filing.	
I declare under penalty of	perjury under the laws of the state of Kentucky that the f	oregoing is true and correct.
Patrick Henshaw	Patrick Henshaw Manager	

Printed Name

Title

Signature of Authorized Representative