

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
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Michael G. Adams
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
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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 **profit corporation**.
2. The name of the entity is: **AXCIS INFORMATION NETWORK, INC.**
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 **New York**.
5. The date of organization is **4/18/1989** and the period of duration is **perpetual**.

7. Principal Office

821 Corporate Drive
Lexington, KY 40503

8. Required Representatives

Secretary	Marc Summers	250 Park Avenue, New York 20th Floor	NY	10177
Director	Kyle McDoniel	821 Corporate Drive Lexington	KY	40503
Director	James Gagliano	250 Park Avenue, New York 20th Floor	NY	10177
Director	Laura Barillaro	250 Park Avenue, New York 20th Floor	NY	10177

9. Registered Agent/Office

Kristin Werner
821 Corporate Drive
Lexington, KY 40503

I, **Kristin Werner**, consent to serve as the **Registered Agent** on behalf of this Entity.
on Thursday, June 29, 2023

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