

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

L902

1371022.06
Michael G. Adams
Secretary of State
Received and Filed
6/11/2024 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

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 **limited liability company**.

2. The name of the entity is

GENESIS FIVE ENTERPRISES LLC

3. The state or country under whose law the entity is organized is **South Carolina**.

4. The date of organization is **12/2/2013** and the period of duration is **perpetual**.

5. The mailing address of the entity's principal office is

2405 JONESVILLE LOCKHART HWY, UNION, SC 29379

6. The name of the initial registered agent is

RUSSELL D MORGAN

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

180 KIMBERLY DRIVE, PADUCAH, KY 42001

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

Member	MARK D JORDAN	2405 JONESVILLE LOCKHART HWY, UNION, SC 29379
---------------	---------------	---

8. This entity is managed by **Members**.

9. This application will be effective on **Tuesday, June 11, 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 **Member: Mark D Jordan**

I, **RUSSELL D MORGAN**, consent to serve as the Registered Agent on behalf of this entity on Tuesday, June 11, 2024.