

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

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Michael G. Adams  
KY Secretary of State

Received and Filed

4/17/2023 12:00:00 AM

Fee receipt: \$480.00

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**

**RCA**

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: SOLUTIONS 2 GO, LLC
3. The name of the entity to be used in Kentucky is (if applicable):
4. It is an entity organized and existing under the laws of the state of California.
5. The date of organization is See Original Certificate of Authority. and the period of duration is perpetual

**Principal Office**

5000 COMMERCE CROSSINGS SUITE 102  
LOUISVILLE, KY 40229

**Registered Agent Name/Address**

NATIONAL REGISTERED AGENTS, INC.  
306 W. MAIN STREET, SUITE 512  
FRANKFORT, KY 40601

**Members/Managers**

Member	GABRIELLE CHEVALIER	15 PRODUCTION ROAD, BRAMPTON, ONTARIO, L6T4N8
Member	OLIVER BOCK	15 PRODUCTION ROAD, BRAMPTON, ONTARIO, L6T4N8
Manager	JASON GONSALVES	15 PRODUCTION ROAD, BRAMPTON, ONTARIO, L6T4N8

6. As the Authorized Representative, I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Jason Gonsalves on 4/17/2023

7. As the Registered Agent, I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. NATIONAL REGISTERED AGENTS, INC. on 4/17/2023