

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
(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 business entity is a **nonprofit corporation**.
2. The name of the entity is: **NASPA**
3. The name of the entity to be used in Kentucky is (if applicable): **NASPA INC.**
4. The state or country whose law the entity is organized is **District of Columbia**.
5. The date of organization is **6/10/1988** and the period of duration is **perpetual**.

7. Principal Office

111 K ST NE 10th FL
Washington, DC 20002

8. Required Representatives

Director	Amy M Shopkorn	111 K ST NE 10TH FL	WASHINGTON	DC	20002
Secretary	OLIVIA NEMBARD	111 K ST NE 10TH FL	WASHINGTON	DC	20002

9. Registered Agent/Office

C T Corporation System
306 W Main St Ste 512
Frankfort, KY 40601

I, **CT Corporation**, consent to sign for **C T Corporation System** who serves as the **Registered Agent** on behalf of this Entity.
on Monday, July 10, 2023

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