

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 **profit corporation**.
2. The name of the entity is: **BEST SUPPLY INC**
3. The state or country whose law the entity is organized is **Ohio**.
4. The date of organization is **7/3/1997** and the period of duration is **perpetual**.

**5. Principal Office**

33999 Melinz Parkway  
Eastlake, OH 44095

**6. Required Representatives**

<b>Officer</b>	Tracy Smearman	33999 Melinz Parkway	Eastlake	OH	44095
<b>Officer</b>	Timothy Small	33999 Melinz Parkway	Eastlake	OH	44095
<b>Officer</b>	Robert Malandra	33999 Melinz Parkway	Eastlake	OH	44095

**7. Registered Agent/Office**

Registered Agent Solutions Inc  
828 Lane Allen Road  
Suite 219  
Lexington, KY 40504

I, **Jaclyn Wright, Asst. Secretary**, consent to sign for **Registered Agent Solutions Inc** who serves as the **Registered Agent** on behalf of this Entity.  
on Thursday, November 9, 2023

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