

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

L902

1416625.06
Michael G. Adams
Secretary of State
Received and Filed
12/20/2024 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

Folklore Entertainment, LLC

3. The name of the entity to be used in Kentucky is

Folklore Entertainment, LLC

4. The state or country under whose law the entity is organized is **Georgia**.

5. The date of organization is **6/12/2013** and the period of duration is **perpetual**.

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

190 Heatherden Ave, Fayetteville, GA 30214

7. The name of the initial registered agent is

Michael Lane

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

12506 Saxony Park Cir Unit 101, Jeffersontown, KY 40299

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

Registered Agent	Michael Lane	12506 Saxony Park Cir Unit 101, Jeffersontown, KY 40299
Manager	Elizabeth Everett	190 Heatherden Ave, Fayetteville, GA 30214
Authorized Rep	Michael Lane	12506 Saxony Park Cir Unit 101, Jeffersontown, KY 40299

9. This entity is managed by **Managers**.

10. This filing will be effective on **Friday, December 20, 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 **Authorized Rep**:

Michael Lane

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I, **Michael Lane**, consent to sign for **Michael**
the Registered Agent on behalf of this entity
20, 2024.

