

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
Secretary of State  
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Michael G. Adams  
Secretary of State  
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Frankfort, KY 40602-0718  
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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

**SUMMIT CROSSING INVESTMENT GROUP LLC**

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

4. The date of organization is **3/21/2025** and the period of duration is **perpetual**.

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

**11503 Springfield Pike, Suite 210, Cincinnati, OH 45246**

6. The name of the initial registered agent is

**QI Services-Kentucky, Inc.**

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

**50 E. Rivercenter Blvd., Suite 200, Covington, KY 41011**

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

<b>Member</b>	Coleman Nelson	1577 Silverglade Ct., Cincinnati, OH 45240
<b>Member</b>	Jered Sturm	8920 Spooky Ridge Ln., Cincinnati, OH 45242
<b>Member</b>	Andrew Sturm	9040 Spooky Ridge Ln., Cincinnati, OH 45242

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

9. This filing will be effective on **Monday, April 21, 2025**.

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: Coleman Nelson**

I, **Marshall K. Dosker**, consent to sign for **QI Services-Kentucky, Inc.** who serves as the Registered Agent on behalf of this entity on Monday, April 21, 2025.