

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

L902  
1401127.06  
Michael G. Adams  
Secretary of State  
Received and Filed  
10/11/2024 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  
**CB CAPITAL GROUP, LLC**
3. The state or country under whose law the entity is organized is **Wyoming**.
4. The date of organization is **9/17/2024** and the period of duration is **perpetual**.
5. The mailing address of the entity's principal office is  
**8015 101St AVE NE, Lake Stevens, WA 98258-8977**
6. The name of the initial registered agent is

**NCH Registered Agent**

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

**710 E Main St, Lexington, KY 40502**

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

<b>Manager</b>	TERRY PAWLOWSKI	8015 101St AVE NE, Lake Stevens, WA 98258-8977
<b>Organizer</b>	TERRY PAWLOWSKI	8015 101St AVE NE, Lake Stevens, WA 98258-8977
<b>Manager</b>	BRENDA PAWLOWSKI	8015 101St AVE NE, Lake Stevens, WA 98258-8977
<b>Organizer</b>	BRENDA PAWLOWSKI	8015 101St AVE NE, Lake Stevens, WA 98258-8977

8. This entity is managed by **Managers**.
9. This filing will be effective on **Friday, October 11, 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 **MANAGER: TERRY**

**PAWLOWSKI**

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I, **Trevor Rowley**, consent to sign for **NCH**  
who serves as the Registered Agent on behalf of  
Friday, October 11, 2024.

