# Commonwealth of Kentucky Michael G. Adams, Secretary of State

1442327.09 Michael G. Adams Secretary of State Received and Filed 3/28/2025 12:00:00 AM

Fee receipt: \$90

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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 entity is a **profit corporation**.
- 2. The name of the entity is

#### **ABA PROTECTION INC**

- 3. The state or country under whose law the entity is organized is **California**.
- 4. The date of organization is 3/26/2015 and the period of duration is perpetual.
- 5. The mailing address of the entity's principal office is

212 N. 2nd St. STE 100, Richmond, KY 40475

6. The name of the initial registered agent is

## **Northwest Registered Agent LLC**

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

## 212 N. 2nd St. STE 100, Richmond, KY 40475

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

Director	Anton Belov	212 N. 2nd St. STE 100, Richmond, KY 40475
Officer	Anton Belov	212 N. 2nd St. STE 100, Richmond, KY 40475
Secretary	Anton Belov	212 N. 2nd St. STE 100, Richmond, KY 40475

8. This filing will be effective on Friday, March 28, 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 **Authorized Signer: Nat Smith** 

I, **Taylor Newman**, consent to sign for **Northwest Registered Agent LLC** who serves as the Registered Agent on behalf of this entity on Friday, March 28, 2025.