

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
Received and Filed

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Fee receipt: \$90.00

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 **limited liability company**.
2. The name of the entity is: **AJK & ASSOCIATE LLC**
3. The name of the entity to be used in Kentucky is (if applicable): **N/A**
4. The state or country whose law the entity is organized is **Georgia**.
5. The date of organization is **4/28/2023** and the period of duration is **perpetual**.
6. This entity is managed by Members

7. Principal Office

1300 Envoy Circle
Louisville, KY 40299

8. Required Representatives

Member	Rex Mills	1300 Envoy Circle Louisville	Ky	40299
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9. Registered Agent/Office

Mold Shield LLC
1300 Envoy Circle Ste 1304
Louisville, KY 40299

I, **Mold Shield LLC**, consent to sign for **Mold Shield LLC** who serves as the **Registered Agent** on behalf of this Entity.

on Friday, June 2, 2023

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