

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY 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 business entity is a **profit corporation**.
2. The name of the entity is: **TRI-STATE COUNTERTOPS**
3. The name of the entity to be used in Kentucky is (if applicable): **TRI-STATE COUNTERTOPS CORP.**
4. The state or country whose law the entity is organized is **Indiana**.
5. The date of organization is **2/7/2018** and the period of duration is **perpetual**.
This Filing is Effective on Wednesday, February 7, 2024

6. Principal Office

1150 Maxwell Ave
evansville, IN 47711

7. Required Representatives

Officer	Nicholaus Cleveland	1150 Maxwell Ave	Evansville	IN	47711
Officer	Amanda Cleveland	2032 Woodland Hills Dr	Evansville	IN	47725

8. Registered Agent/Office

Amanda Cleveland
3053 Alvey Park DR W. Suite B
Owensboro, KY 42303

I, **Amanda Cleveland**, consent to serve as the **Registered Agent** on behalf of this Entity.
on Wednesday, February 7, 2024

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