

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

L902

1397629.06  
Michael G. Adams  
Secretary of State  
Received and Filed  
9/25/2024 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

**AFC INTERNATIONAL LLC**

3. The name of the entity to be used in Kentucky is

**AFC INTERNATIONAL LLC**

4. The state or country under whose law the entity is organized is **Georgia**.

5. The date of organization is **2/5/2009** and the period of duration is **perpetual**.

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

**16520 S Tamiami Trl Ste 180, Fort Myers, FL 33908**

7. The name of the initial registered agent is

**Christina Trowbridge**

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

**1301 Aviation Blvd Ste 210, Hebron, KY 41048**

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

<b>Registered Agent</b>	Christina Trowbridge	1301 Aviation Blvd Ste 210, Hebron, KY 41048
<b>Manager</b>	Robert A Bowman	16520 S Tamiami Trl Ste 180, Fort Myers, FL 33908
<b>Authorized Rep</b>	Christina Trowbridge	16520 S Tamiami Trl Ste 180, Fort Myers, FL 33908

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

10. This filing will be effective on **Wednesday, September 25, 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 **Authorized Rep**:

**Christina Trowbridge**

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I, **Christina Trowbridge**, consent to sign for **Trowbridge** who serves as the Registered entity on Wednesday, September 25, 2024.

