

COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings **Business Filings** Statement of Consent of Registered Agent PO Box 718 CRA (Domestic or Foreign Business Entity) Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov Pursuant to the provisions of KRS 14A and KRS Chapter 271B, 273, 274, 275, 362 or 386, the undersigned applicant consents to act as registered agent on behalf of the business entity named below and, for that purpose, submits the 1. The business entity is a corporation (KRS 271B, KRS 273 or KRS 274) a limited liability company (KRS 275) a limited partnership (KRS 362) a limited liability partnership (KRS 362) a business trust (KRS 386) 2. The name of the business entity is 3. The state or country of incorporation, organization or formation is 4. The name of the initial registered agent is 5. The street address of the registered office address in Kentucky is: Street Address (No Post Office Box Numbers) 6. This application will be effective upon filing, unless a delayed effective date and/or time is provided. The effective date or the delayed effective date cannot be prior to the date the application is filed. The date and/or time is (Delayed effective date and/or time) I declare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct. Signature of Registered Agent Printed Name