

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: **NEZEZA FARMS LLC**
3. The name of the entity to be used in Kentucky is (if applicable): **NEZEZA DISTRIBUTORS LLC**
4. The state or country whose law the entity is organized is **Rwanda**.
5. The date of organization is **1/16/2024** and the period of duration is **perpetual**.
This Filing is Effective on Tuesday, January 16, 2024
6. This entity is managed by Members

7. Principal Office

5530 Woodburn Allen Springs Road
Bowling Green, KY 42104

8. Required Representatives

Member	Jean Dominique Gumirakiza	5530 Woodburn Allen Springs Road	Bowling Green	KY	42104
Member	Jean De Dieu Hakizimana	5530 Woodburn Allen Springs Road	Bowling Green	KY	42104
Member	Marlette Umutoni	5530 Woodburn Allen Springs Road	Bowling Green	KY	42104
Member	Marie Josee Akuzwe	5530 Woodburn Allen Springs Road	Bowling Green	KY	42104

9. Registered Agent/Office

Jean Dominique Gumirakiza
5530 Woodburn Allen Springs Road
Bowling Green, KY 42104

I, **Jean Dominique Gumirakiza**, consent to serve as the **Registered Agent** on behalf of this Entity.
on Tuesday, January 16, 2024

As the Authorized Representative, I, **Jean Dominique Gumirakiza**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Member**