

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

1269932

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 **profit corporation**.
2. The name of the entity is: **GRAHAM GROUP (US) INC.**
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 **Washington**.
5. The date of organization is **12/18/1991** and the period of duration is **perpetual**.

7. Principal Office

13555 SE 36th ST
Suite 120
Bellevue, WA 98006-1442

8. Required Representatives

Secretary	Tony Clark	13555 SE 36th St., Suite 120	Bellevue	WA	98006-1442
Officer	Brian Janzen	13555 SE 36th St., Suite 120	Bellevue	WA	98006-1442
Officer	Tim Heavenor	13555 SE 36th St., Suite 120	Bellevue	WA	98006-1442
Officer	Andy Trewick	13555 SE 36th St., Suite 120	Bellevue	WA	98006-1442
Director	Andy Trewick	13555 SE 36th St., Suite 120	Bellevue	WA	98006-1442
Director	Bryon White	12655 W. 54th Drive	Arvada	CO	80002
Director	Eric Moltz	8807 Country Road 175	P.O. Box 729	CO	81201
Director	Michael Pavlovich	12655 W. 54th Drive	Arvada	CO	80002

9. Registered Agent/Office

Registered Agent Solutions, Inc.
828 Lane Allen Road
Suite 219
Lexington, KY 40504

I, **Adam Saldana, Asst. Secretary**, consent to sign for **Registered Agent Solutions, Inc.** who serves as the **Registered Agent** on behalf of this Entity.
on Thursday, March 23, 2023

As the Authorized Representative, I, **Stephanie Doiron**, declare under penalty of perjury under the laws of the

state of Kentucky that the foregoing is true and correct. Title: **Agent**

P101

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Michael G. Adams

KY Secretary of State

Received and Filed

3/23/2023 3:20:19 PM

Fee receipt: \$90.00

