

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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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: **TRANSFUR, 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 **Delaware**.
5. The date of organization is **8/2/2021** and the period of duration is **perpetual**.

7. Principal Office

830 Massachusetts Ave., Ste. 1500
Indianapolis, IN 46204

8. Required Representatives

Officer	Gary Watson	830 Massachusetts Ave., Ste. 1500	Indianapolis	IN	46204
Director	Elliott Parker	830 Massachusetts Ave., Ste. 1500	Indianapolis	IN	46204

9. Registered Agent/Office

Registered Agents Inc.
212 N 2nd Street, Suite 100
Richmond, KY 40475

I, **Bill Havre, Assistant Secretary**, consent to sign for **Registered Agents Inc.** who serves as the **Registered Agent** on behalf of this Entity.
on Wednesday, March 22, 2023

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