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Michael G. Adams Kentucky Secretary of State Received and Filed:

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## COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Certificate of (Foreign Busi			WFE
Pursuant to the provisions of KR: business entity named below and	S 14A - 030 the unders d, for that purpose, sub	signed applies for a ce mits the following sta	ertificate of withdratements:	awal on behalf of the
1. The name of the business ent	tity is DAIMLER TRUS	Γ		
		e identical to the name	on record with th	e Secretary of State.)
2. The state or country of format	tion is Delaware			
The Secretary of State may for on the Secretary of State and	prward to the business	entity at the following Secretary of State of	street address ar any future change	ly process served
35555 W. Twelve Mile Road, Suite	100	Farmington Hills	MI	48331
Street Address (No Post Office Bo	x Numbers)	City	State	Zip Code
4. The business entity is not tran in the Commonwealth or pursuant from the commissioner of the Dept.  5. The business entity revokes the Secretary of State as its agent time it was authorized to transact the future of any change in its management.	nt to KRS 14A.9-010(7) partment of Insurance. The authority of its regist of the service of process to business in the Communiting address.	ered agent to accept as in any proceeding ba	a foreign insurer service of process	with a certificate of authority s on its behalf and appoints of action arising during the
6. This application will be effective	e upon filing.			
I declare under penalty of perjury	under the laws of Kent	tucky that the forgoing		ect. 02/06/2023
Signature of Authorized Represent	tative	Printed Name		Date