# Commonwealth of Kentucky Michael G. Adams, Secretary of State

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P101

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 entity is a **profit corporation**.
- 2. The name of the entity is

### **C&H SECURITY INCORPORATED**

3. The name of the entity to be used in Kentucky is

#### C & H SECURITY KY INC.

- 4. The state or country under whose law the entity is organized is Indiana.
- 5. The date of organization is 1/1/2025 and the period of duration is perpetual.
- 6. The mailing address of the entity's principal office is

## 4294 ELK CREEK ROAD, TAYLORSVILLE, KY 40071

7. The name of the initial registered agent is

#### **SCOTT STEVENS**

and the street address of the entity's initial registered office in Kentucky is

# 4294 ELK CREEK ROAD, TAYLORSVILLE, KY 40071

8. The names and business addresses of the entity's representatives:

Officer SCOTT STEVENS

4294 ELK CREEK ROAD, TAYLORSVILLE, KY 40071

9. This filing will be effective on Tuesday, January 14, 2025.

I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

Signature of individual signing on behalf of **PRESIDENT: SCOTT STEVENS** 

I, **SCOTT STEVENS**, consent to serve as the Registered Agent on behalf of this entity on Tuesday, January 14, 2025.