

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: **COREPR8 LLC**
3. The state or country whose law the entity is organized is **Florida**.
4. The date of organization is **1/24/2024** and the period of duration is **1/24/2025**  
This Filing is Effective on Wednesday, January 24, 2024
5. This entity is managed by Managers

**6. Principal Office**

7942 W Mcnab Rd  
N LAUDERDALE, FL 33068

**7. Required Representatives**

<b>Manager</b>	JOHN PETITDOS	7942 W Mcnab Rd N LAUDERDALE	FL	33068
<b>Manager</b>	MARIO DIEUJUSTE	7976 W MCNAB N LAUDERDALE RD	FL	33068

**8. Registered Agent/Office**

JOHN PETITDOS  
1128 US-127  
FRANKFORT, KY 40601

I, **JOHN PETITDOS**, consent to sign for **JOHN PETITDOS** who serves as the **Registered Agent** on behalf of this Entity.  
on Wednesday, January 24, 2024

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