Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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

Laudisi Retail Inc.

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

Laudisi Retail Inc.

4. The state or country under whose law the entity is organized is **South Carolina**.

5. The date of organization is **7/29/2024** and the period of duration is **perpetual**.

6. The mailing address of the entity's principal office is

3750 Ralph Ellis Blvd, Loris, SC 29569

7. The name of the initial registered agent is

Registered Agents Inc

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

212 N 2nd St Ste 100, Richmond, KY 40475

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

Registered Agent	Registered Agents Inc	212 N 2nd St Ste 100, Richmond, KY 40475
Officer	Frank S Wilford	1268 Scenic Dr, Loris, SC 29569
Vice President	Tracy Berry	3750 Ralph Ellis Blvd, Loris, SC 29569
Authorized Rep	Tracy Berry	3750 Ralph Ellis Blvd, Loris, SC 29569

9. This filing will be effective on **Friday, December 13, 2024**.

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 **Authorized Rep: Tracy Berry**

I, **David Roberts**, consent to sign for **Regis**
who serves as the Registered Agent on beha
Friday, December 13, 2024.