Commonwealth of Kentucky Michael G. Adams, Secretary of St

1262837 Michael G. Adams KY Secretary of State Received and Filed

2/24/2023 10:36:09 AM 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

P101

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: SHELTON ASSOCIATES, 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 Pennsylvania.
- 5. The date of organization is 4/30/2013 and the period of duration is perpetual.

7. Principal Office

15 Prestige Ln Lancaster, PA 17603

8. Required Representatives

o. Required Representatives					
Officer	Mark Shelton	15 Prestige Ln	Lancaster	PA	17603
Secretary	Mark Shelton	15 Prestige Ln	Lancaster	PA	17603
Director	Mark Shelton	15 Prestige Ln	Lancaster	PA	17603
Officer	Charles Hall	15 Prestige Ln	Lancaster	PA	17603
Director	Charles Hall	15 Prestige Ln	Lancaster	PA	17603

9. Registered Agent/Office

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

I, **David Roberts**, consent to sign for **Registered Agents Inc** who serves as the **Registered Agent** on behalf of this Entity.

on Friday, February 24, 2023

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