

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY 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 business entity is a **nonprofit corporation**.
2. The name of the entity is: **CINCINNATI MASJID AND FOUNDATION**
3. The name of the entity to be used in Kentucky is (if applicable): **CINCINNATI MASJID AND FOUNDATION INC.**
4. The state or country whose law the entity is organized is **Delaware**.
5. The date of organization is **3/31/2023** and the period of duration is **perpetual**.

7. Principal Office

212 N. 2nd St. STE 100
Richmond, KY 40475

8. Required Representatives

Director	Ahmed Said	212 N. 2nd St. STE 100	Richmond	KY	40475
Director	Ibrahim Ahmed	212 N. 2nd St. STE 100	Richmond	KY	40475
Director	Sulayman Roz	212 N. 2nd St. STE 100	Richmond	KY	40475

9. Registered Agent/Office

Northwest Registered Agent LLC
212 N. 2nd St. STE 100
Richmond, KY 40475

I, **Taylor Newman**, consent to sign for **Northwest Registered Agent LLC** who serves as the **Registered Agent** on behalf of this Entity.
on Friday, June 2, 2023

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