

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

1301237 1301237

Michael G. Adams  
KY Secretary of State

Received and Filed

8/15/2023 1:55:01 PM

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: **CHMURA ECONOMICS & ANALYTICS LLC**
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 **Virginia**.
5. The date of organization is **12/17/1998** and the period of duration is **perpetual**.
6. This entity is managed by Members

**7. Principal Office**

1309 E Cary St, Suite 200  
Richmond, VA 23219

**8. Required Representatives**

<b>Member</b>	Chris Chmura	1309 E Cary St, Suite 200	Richmond	VA	23219
<b>Member</b>	Leslie Peterson	1309 E Cary St, Suite 200	Richmond	VA	23219

**9. Registered Agent/Office**

Registered Agents Inc  
212 N 2nd St, Suite 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 Tuesday, August 15, 2023

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