

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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1357338.06
Michael G. Adams
Secretary of State
Received and Filed
4/15/2024 12:00:00 AM
Fee receipt: \$90

Michael G. Adams
Secretary of State
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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 **limited liability company**.
 2. The name of the entity is
TELESPECIALISTS, LLC
 3. The state or country under whose law the entity is organized is **Florida**.
 4. The date of organization is **10/3/2014** and the period of duration is **perpetual**.
 5. The mailing address of the entity's principal office is
11215 Metro Parkway Building 3 Suite1, Fort Myers, FL 33966
 6. The street address of the entity's registered office in Kentucky is
212 N. 2nd St. STE 100, Richmond, KY 40475
- and the name of the registered agent at that office is **Northwest Registered Agent LLC**.
7. This entity is managed by **Members**.
 8. This application will be effective on **Monday, April 15, 2024**.

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**

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