# Commonwealth of Kentucky Michael G. Adams, Secretary of State

1379538.06 Michael G. Adams Secretary of State Received and Filed 7/17/2024 12:00:00 AM

Fee receipt: \$90

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** 

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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

### SL MANAGEMENT PARTNERS, LLC

- 3. The state or country under whose law the entity is organized is **Delaware**.
- 4. The date of organization is 10/6/2022 and the period of duration is perpetual.
- 5. The mailing address of the entity's principal office is

# 500 Cummings Ctr Ste 4100, Beverly, MA 01915

6. The name of the initial registered agent is

### 3H Agent Services, Inc.

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

## 101 North Seventh Street, Louisville, KY 40202

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

Manager	BR Intermediate Holdings, 3101 N Central Ave Suite 400, Phoenix, AZ 85012 LLC
Organizer	BR Intermediate Holdings, 3101 N Central Ave Suite 400, Phoenix, AZ 85012 LLC

- 8. This entity is managed by **Managers**.
- 9. This application will be effective on Wednesday, July 17, 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 CFO: Andrew Behrends

I, **Kevin Kennedy**, consent to sign for **3H Agent Services**, **Inc.** who serves as the Registered Agent on behalf of this entity on

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Wednesday, July 17, 2024.

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