Commonwealth of Kentucky Michael G. Adams, Secretary of St

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Michael G. /.......
KY Secretary of State
Received and Filed

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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

RCA

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: DORIC PRODUCTS, INC.
- 3. The name of the entity to be used in Kentucky is (if applicable):
- 4. It is an entity organized and existing under the laws of the state of Indiana.
- 5. The date of organization is See Original Certificate of Authority. and the period of duration is perpetual

Principal Office

201 W US HWY 40 (PO BOX 10) MARSHALL, IL 62441

Registered Agent Name/Address

JAMES R WIENS 386 WARREN CHANDLER DR. PO BOX 1345 CORBIN, KY 40701

- 6. As the Authorized Representative, I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. James Wiens on 10/25/2022
- 7. As the Registered Agent, I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. JAMES R WIENS on 10/25/2022