

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

Michael G. Adams
Secretary of State
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Certificate of Authority

FBE

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1423440.06
Michael G. Adams
Secretary of State
Received and Filed
1/21/2025 12:00:00 AM
Fee receipt: \$90

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

MITIL REALTY LLC

3. The state or country under whose law the entity is organized is **Florida**.

4. The date of organization is **1/1/2021** and the period of duration is **perpetual**.

5. The mailing address of the entity's principal office is

PO Box 782003, ORLANDO, FL 32878

6. The name of the initial registered agent is

Sopi Mitil

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

9900 Corporate Campus Drive Suite 300, Louisville, KY 40223

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

Manager	SOPI MITIL	1802 N. ALAFAYA TRAIL, ORLANDO, FL 32878
Organizer	SOPI MITIL	1802 N. ALAFAYA TRAIL, ORLANDO, FL 32878

8. This entity is managed by **Managers**.

9. This filing will be effective on **Tuesday, January 21, 2025**.

This entity is **NOT** a tobacco retailer as defined by KRS 438.305(9).

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 **MANAGER: Sopi Mitil**

I, **Sopi Mitil**, consent to serve as the Registered Agent on behalf of this entity on Tuesday, January 21, 2025.