

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
Secretary of State  
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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 **profit corporation**.

2. The name of the entity is

**Candy Jane's Inc**

3. The name of the entity to be used in Kentucky is

**Candy Jane's Inc**

4. The state or country under whose law the entity is organized is **Tennessee**.

5. The date of organization is **6/9/2022** and the period of duration is **perpetual**.

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

**100 Mooreland Dr, Springfield, TN 37172**

7. The street address of the entity's registered office in Kentucky is

**4901 Outer Loop Ste 101, Louisville, KY 40219**

and the name of the registered agent at that office is **Michael Crawley**.

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

<b>Registered Agent</b>	Michael Crawley	4901 Outer Loop Ste 101	Louisville	KY	40219
<b>Shareholder</b>	Michael Crawley	100 Mooreland Dr	Springfield	TN	37172
<b>Officer</b>	Michael Crawley	100 Mooreland Dr	Springfield	TN	37172
<b>Authorized Rep</b>	Michael Crawley	100 Mooreland Dr	Springfield	TN	37172

9. This application will be effective on **Thursday, April 18, 2024**.

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

I, **Michael Crawley**, consent to sign for **Michael Crawley** who serves as the **Registered Agent** on behalf of this profit corporation company.