1315542.06



COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE Michael G. Adams Kentucky Secretary of State Received and Filed: 10/17/2023 2:28 PM Fee Receipt: \$90.00

mmoore ADD

Division of Business F	ilings	Certificate of Authority				FBE		
P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov				eign Business Entity)	y			
Pursuant to the provisio and, for that purpose, s		•	ned he	reby applies for authority to tr	ransact busines	ss in Kentucky on be	ehalf of the entity named below	
1. The entity is a:	profit corpora	ion		nonprofit corporation		professional limited	d liability company	
	business trus	business trust		limited liability company		statutory trust		
	limited partnership			Itd cooperative association		public benefit corp	oration	
	non-profit IIc			professional service corpora	ition	other		
2. The name of the ent		ic Enterprises, L	LC					
2. The name of the ent	(The n	ame must be ider	ntical	to the name on record with	the Secretary	of State.)		
3. The name of the ent								
5. The name of the ent	ity to be used in r	tentucky is (ii appli	cable,	(Only provide if "real na	me" is unavai	lable for use; other	wise, leave blank.)	
4. The state or country	under whose law	the entity is organ	ized is					
5. The date of organiza				and the period o	of duration is			
er me date er ergannet						t blank, duration is	considered perpetual.)	
The mailing address	of the entity's pri	ncipal office is		0 I ID		120	((2))	
11401 Lamar Ave				Overland Par	rk	KS	<u>66211</u>	
Street Address				City		State	Zip Code	
7. The street address of		stered office in Ker	ntucky				10.001	
306 W. Main Street,				Frankfort	60	KY	40601	
Street Address (No P. and the name of the reg				Cit	У	State	Zip Code	
8. The names and bus Tim Ware Name		of the entity's repre 1401 Lamar Av Street or P.O. Bo	e	tives (secretary, officers and d Overland Pa City	ark	gers, trustees or ger <u>Kansas</u> State	66211 Zip Code	
Vince Coletta		11401 Lamar A		Overland Pa	ark	Kansas	66211	
Name		Street or P.O. Bo		City	1	State	Zip Code	
Rich Jacober Name		11401 Lamar A Street or P.O. Bo		Overland Pa City	ark	Kansas State	66211 Zip Code	
9. If a professional serv	ice corporation, a sed in one or more	II the individual sha e states or territorie	arehol			ors, and all of the of	ficers other than the secretary	
10. I certify that, as of the	ne date of filing th	is application, the	above	-named entity validly exists ur	nder the laws of	f the jurisdiction of it	s formation.	
11. If a limited partners	hip, it elects to be	a limited liability li	mited	partnership. Check the box if	f applicable:			
12. If a limited liability	company, check	box if manager-n	nanag	ed:				
13. This application will	be effective upor	n filing.						
ERB				Eria Donton Sonio	Tax Manag	or 10/10/	0022	
Signature of Authorized	Renresentative			Eric Benton Senio	or Tax Manag	$r = \frac{10/10/2}{10/10/2}$	Date	
Signature of Authorized	representative			Finted Name	G THUS		Date	
I, <u>C T Corporation S</u> Type/Print Name of Re	gistered Agent			, consent to serve as	the registered	agent on behalf of th	ne business entity.	
By: C T Corpo	oration System	Sharry Mebines	S	herry McGinnes	Assiatot	Secretary	10-17-2023	
Signature of Registered	Agent			ted Name	Title		Date	