

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

Michael G. Adams
Secretary of State
P. O. Box 718
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Certificate of Authority

FBE

L902
1402942.06
Michael G. Adams
Secretary of State
Received and Filed
10/31/2024 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

Lasley Floor Coverings LLC

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

Lasley Floor Coverings LLC

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

5. The date of organization is **9/3/2024** and the period of duration is **perpetual**.

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

2701 North Cullen Ave, Evansville, IN 47715

7. The name of the initial registered agent is

Registered Agents Inc

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

212 N 2nd St Ste 100, Richmond, KY 40475

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

Registered Agent	Registered Agents Inc	212 N 2nd St Ste 100, Richmond, KY 40475
Manager	Christopher Lasley	800 Myers Rd, Boonville, IN 47601
Manager	Christopher Lasley	800 Myers Rd, Boonville, IN 47601
Manager	Christopher Lasley	800 Myers Rd, Boonville, IN 47601
Authorized Rep	Christopher Lasley	800 Myers Rd, Boonville, IN 47601

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

10. This filing will be effective on **Thursday, October 31, 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 **Manager: Christopher**

Lasley

I, **David Roberts**, consent to sign for **Regis**
who serves as the Registered Agent on behalf of
Monday, October 21, 2024.

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