

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

L902

1414043.06  
Michael G. Adams  
Secretary of State  
Received and Filed  
12/9/2024 12:00:00 AM  
Fee receipt: \$90

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

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 **limited liability company**.

2. The name of the entity is

**Nth Corner LLC**

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

**Nth Corner LLC**

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

5. The date of organization is **6/5/2024** and the period of duration is **perpetual**.

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

**7600 E Co Rd 400 S, Dupont, IN 47231**

7. The name of the initial registered agent is

**Kevin Mullikin**

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

**42 Trout Ridge Rd, Bedford, KY 40006**

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

<b>Registered Agent</b>	Kevin Mullikin	42 Trout Ridge Rd, Bedford, KY 40006
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<b>Authorized Rep</b>	Chris Klosterman	7600 E Co Rd 400 S, Dupont, IN 47231
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9. This entity is managed by **Members**.

10. This filing will be effective on **Monday, December 9, 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 **Authorized Rep: Chris Klosterman**

I, **Kevin Mullikin**, consent to sign for **Kevin Mullikin** who serves

as the Registered Agent on behalf of this entity  
December 9, 2024.

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