Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

## Amended Certificate of Authority

Pursuant to the provisions of KRS chapters 14A and 271B, 273, 274, 275, 362, or 386, the undersigned hereby applies for an amended certificate of authority on behalf of the entity named below, and for that purpose, submits the following statements:

- The business entity is a limited liability company (KRS 275). 1.
- 2. The name of the business entity is:

## **BLN EMERGENCY MANAGEMENT, LLC**

- 3. It is an entity organized and existing under the laws of the state of Indiana.
- The entity received authority to transact business in Kentucky on 10/9/2023. 4.
- The entity has changed its 5.

Domicile name to Egis BLN Consulting USA, LLC

As the authorized representative, I, Ron Ellis, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: Chief Financial Officer

12/27/2023

P102

Received and Filed 12/27/2023 10:39:04 PM Fee receipt: \$40.00

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