

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
KY Secretary of State  
Received and Filed

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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 business entity is a **limited liability company**.
2. The name of the entity is: **KENTUCKY42, LLC**
3. The name of the entity to be used in Kentucky is (if applicable): **N/A**
4. The state or country whose law the entity is organized is **Ohio**.
5. The date of organization is **4/25/2023** and the period of duration is **perpetual**.
6. This entity is managed by Members

**7. Principal Office**

Kentucky42, LLC  
3061 Madison Road  
CINCINNATI, OH 45209

**8. Required Representatives**

Member	Chuck Lipp	3061 Madison Road	Cincinnati	OH	45209
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**9. Registered Agent/Office**

K & P Statutory Services, Inc.  
59 Broadview Place  
Ft. Thomas, KY 41075

I, **Andrew J. Hogan, Vice-President**, consent to sign for **K & P Statutory Services, Inc.** who serves as the **Registered Agent** on behalf of this Entity.  
on Wednesday, April 26, 2023

As the Authorized Representative, I, **Andrew J. Hogan**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Attorney**