

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

N101
1409947.09
Michael G. Adams
Secretary of State
Received and Filed
11/18/2024 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 **nonprofit corporation**.

2. The name of the entity is

5P Society

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

5P SOCIETY CORPORATION

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

5. The date of organization is **11/13/1989** and the period of duration is **perpetual**.

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

6229 Eckleson Street, Lakewood, CA 90713

7. The name of the initial registered agent is

Robert Brookman

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

4003 Centerwood Dri, Crestwood, KY 40014

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

Director	Laura Castillo	PO Box 268, Lakewood, CA 90714
Secretary	Gloria Griffin	603 Wimpleton Pl, Louisville, KY 40206
Officer	Nicholas Wallace	801 Allison Rd, Bellefontaine, OH 43311

9. This filing will be effective on **Monday, November 18, 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 **Executive Director:**
Laura Castillo

I, **Robert Brookman**, consent to serve as the Registered Agent

on behalf of this entity on Monday, November

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