

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
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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 **profit corporation**.
2. The name of the entity is: **NORMANMAX RISK ADVISORS, INC.**
3. The state or country whose law the entity is organized is **Florida**.
4. The date of organization is **2/7/2023** and the period of duration is **perpetual**.
This Filing is Effective on Wednesday, February 28, 2024

5. Principal Office

One West Las Olas Blvd. Suite 200
Fort Lauderdale, FL 33301

6. Required Representatives

Officer	Bradley Meier	One West Las Olas Blvd. Suite 200	Fort Lauderdale	FL	33301
Officer	Derrick Alvarez	One West Las Olas Blvd. Suite 200	Fort Lauderdale	FL	33301

7. Registered Agent/Office

Corporate Creations Network Inc.
101 North Seventh Street
Louisville, KY 40202

I, **Marie Edwards**, consent to sign for **Corporate Creations Network Inc.** who serves as the **Registered Agent** on behalf of this Entity.
on Wednesday, February 28, 2024

As the Authorized Representative, I, **Bradley Meier**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **CEO**