



COMMONWEALTH OF KENTUCKY  
MICHAEL G. ADAMS, SECRETARY OF STATE

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Michael G. Adams  
Kentucky Secretary of State  
Received and Filed:  
7/23/2024 9:46 AM  
Fee Receipt: \$90.00

Division of Business Filings  
P.O. Box 718  
Frankfort, KY 40602  
(502) 564-3490  
[www.sos.ky.gov](http://www.sos.ky.gov)

Certificate of Authority  
(Foreign Business Entity)

FBE

Pursuant to the provisions of KRS 14A – 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: ☒ profit corporation ☐ nonprofit corporation ☐ professional limited liability company  
☐ business trust ☐ limited liability company ☐ statutory trust  
☐ limited partnership ☐ ltd cooperative association ☐ other  
☐ non-profit llc ☐ professional service corporation

2. The name of the entity is Lenovo Product Marketplace, Inc.  
(The name must be identical to the name on record with the Secretary of State.)

3. The name of the entity to be used in Kentucky is (if applicable): \_\_\_\_\_  
(Only provide if "real name" is unavailable for use; otherwise, leave blank.)

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

5. The date of organization is 06/17/2024 and the period of duration is \_\_\_\_\_  
(If left blank, duration is considered perpetual.)

6. The mailing address of the entity's principal office is  
8001 Development Drive Morrisville NC 27560  
Street Address City State Zip Code

7. The street address of the entity's registered office in Kentucky is  
306 W. Main Street, Suite 512 Frankfort KY 40601  
Street Address (No P.O. Box Numbers) City State Zip Code

and the name of the registered agent at that office is C T Corporation System

8. The names and business addresses of the entity's representatives (secretary, officers and directors, managers, trustees or general partners):

Kurt Cranor	8001 Development Drive	Morrisville	NC	27560
Name	Street or P.O. Box	City	State	Zip Code
John Stanley	8001 Development Drive	Morrisville	NC	27560
Name	Street or P.O. Box	City	State	Zip Code
Name	Street or P.O. Box	City	State	Zip Code

9. If a professional service corporation, all the individual shareholders, not less than one half (1/2) of the directors, and all of the officers other than the secretary and treasurer are licensed in one or more states or territories of the United States or District of Columbia to render a professional service described in the statement of purposes of the corporation.

10. I certify that, as of the date of filing this application, the above-named entity validly exists under the laws of the jurisdiction of its formation.

11. If a limited partnership, it elects to be a limited liability limited partnership. Check the box if applicable: ☐

12. If a limited liability company, check box if manager-managed: ☐

13. This application will be effective upon filing.

STEPHEN RULLIS, VICE PRESIDENT 07/19/2024

Signature of Authorized Representative

Printed Name & Title

Date

I, C T Corporation System, consent to serve as the registered agent on behalf of the business entity.  
Type/Print Name of Registered Agent

By: C T Corporation System, SEAN L. EMERICK ASSISTANT SECRETARY 07/18/2024  
Signature of Registered Agent Printed Name Title Date

**POWER OF ATTORNEY**

**NOTICE IS HEREBY GIVEN THAT LENOVO PRODUCT MARKETPLACE, INC.**, a Corporation incorporated under the laws of the state of Delaware and the direct or indirect owner of the subsidiary entities shown on Schedule A attached hereto, does hereby appoint as attorneys-in-fact for the Corporation (the "Appointees") those individuals who are officers and/or employees of C T Corporation System ("CT") or its agents, (but only for so long as such individuals remain officers and/or employees of CT or an affiliate thereof), to act for the Corporation and in the corporation's name for the limited purposes authorized herein

The Corporation, having taken all necessary steps to authorize the changes, hereby grants its attorney-in-fact the power to execute the documents necessary to qualify the **LENOVO PRODUCT MARKETPLACE, INC.** in any state, as directed and authorized by the Corporation.

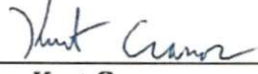
In the execution of any documents necessary for the sole, limited purpose, set forth herein, the Appointees shall exercise the power of Vice President, Secretary, Manager, and/or Member.

This Power of Attorney expires when revoked by the undersigned.

**IN WITNESS WHEREOF** the undersigned has executed this Power of Attorney on this 9<sup>th</sup> of JULY 2024

**LENOVO PRODUCT MARKETPLACE, INC.**

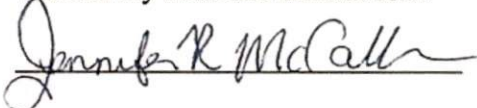
A Delaware Corporation

By:   
Name: Kurt Cranor  
Title: President

State of \_\_\_\_\_  
County of \_\_\_\_\_

On JULY 9<sup>th</sup> 2024, before me, the undersigned, a Notary Public in and for said State, personally appeared Kurt Cranor, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me he/she/they executed the same in his/her/their authorized capacity (ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed this instrument.

Witness my hand and official seal.



, Notary Public



**SCHEDULE A - POWER OF ATTORNEY TO C T CORPORATION SYSTEM**

A handwritten signature in black ink, appearing to read "Stephen Rullis". The signature is fluid and cursive, with the first name "Stephen" and last name "Rullis" clearly distinguishable.

Stephen Rullis, Vice President