

**Commonwealth of Kentucky  
Michael G. Adams, Secretary of State**

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Michael G. Adams  
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 entity is a **profit corporation**.

2. The name of the entity is

**ALL PRO APPRAISAL MANAGEMENT, INC.**

3. The state or country under whose law the entity is organized is **New York**.

4. The date of organization is **8/12/2013** and the period of duration is **perpetual**.

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

**29 VALLEY DRIVE # 5301, GREENWICH, CT 06831**

6. The name of the initial registered agent is

**Northwest Registered Agent LLC**

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

**212 N. 2nd St. STE 100, Richmond, KY 40475**

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

**Director**                      HEATHER JAMES                      29 VALLEY DRIVE # 5301, GREENWICH, CT  
06831

8. This application will be effective on **Thursday, May 23, 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 **Compliance: DJ Miller**

I, **DJ Miller**, consent to sign for **Northwest Registered Agent LLC** who serves as the Registered Agent on behalf of this entity on Thursday, May 23, 2024.