

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

Michael G. Adams  
Secretary of State  
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Michael G. Adams  
Secretary of State  
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**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

**ELECTRONIC SECURITY PROFESSIONALS, INC.**

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

4. The date of organization is **1/3/2012** and the period of duration is **perpetual**.

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

**PO Box 757, Firestone, CO 80520-0757**

6. The name of the initial registered agent is

**Registered Agents Inc.**

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:

**Officer** Jonathan Jensen PO Box 757, Firestone, CO 80520-0757

8. This application will be effective on **Thursday, August 1, 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 **President: Jonathan Jensen**

I, **David Roberts**, consent to sign for **Registered Agents Inc.** who serves as the Registered Agent on behalf of this entity on Thursday, August 1, 2024.