

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
KY 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 business entity is a **limited liability company**.
2. The name of the entity is: **ICE TEAMS, LLC**
3. The name of the entity to be used in Kentucky is (if applicable):
4. The state or country whose law the entity is organized is **Utah**.
5. The date of organization is **8/1/2016** and the period of duration is **perpetual**.
6. This entity is managed by Managers

**7. Principal Office**

221 Historic 25th Street  
OGDEN, UT 84401

**8. Required Representatives**

<b>Manager</b>	Daniel Bender	221 Historic 25th Street	OGDEN	UT	84401
<b>Manager</b>	Christopher Wilson	221 Historic 25th Street	OGDEN	UT	84401

**9. Registered Agent/Office**

Registered Agents Inc  
212 N. 2nd St., STE 100  
Richmond, KY 40475

I, **Daniel Bender**, consent to sign for **Registered Agents Inc** who serves as the **Registered Agent** on behalf of this Entity.  
on Thursday, December 29, 2022

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