

## COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

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Michael G. Adams Kentucky Secretary of State Received and Filed: 4/26/2024 1:45 PM

04/26/2024

Date

Fee Receipt: \$90.00

P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov		usiness Entity)		FRE
Pursuant to the provisions of KRS 14A - and, for that purpose, submits the following		oplies for authority to transact	business in Kentucky o	on behalf of the entity named below
The entity is a: profit corpora business trus limited partne non-profit llc      The name of the entity is LeaveLog	t limited rship ltd coo	ofit corporation I liability company operative association sional service corporation	statutory trust public benefit of	nited liability company corporation
3. The name of the entity to be used in h		name on record with the Sec	cretary of State.)	
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4. The state or country under whose law				*
5. The date of organization is May 5, 2	.015	and the period of durati	on is (If left blank, duration	on is considered perpetual.)
6. The mailing address of the entity's pri	ncipal office is	Dodland		04122
2211 Congress Street Street Address		Portland City	ME State	Zip Code
7. The street address of the entity's regited 421 West Main Street	stered office in Kentucky is	Frankfort	KY	40601
Street Address (No P.O. Box Numbers	5)	City	Sta	
and the name of the registered agent at	that office is Corporation Se	rvice Company		
8. The names and business addresses			, managers, trustees or	general partners):
J. Paul Jullienne	1 Fountain Square	Chattanooga	TN	37402
Name	Street or P.O. Box	City	State	Zip Code
Lisa G. Iglesias Name	1 Fountain Square Street or P.O. Box	Chattanooga City	TN State	37402 Zip Code
Swapnil Prabha	2211 Congress Street	Portland	ME	04122
	Street or P.O. Box officers listed in the a	City	State	Zip Code
If a professional service corporation, a and treasurer are licensed in one or more statement of purposes of the corporation.	all the individual shareholders, no e states or territories of the Unite	ot less than one half (1/2) of th	e directors, and all of the directors, and all of the directors and all of the directors.	ne officers other than the secretary anal service described in the
10. I certify that, as of the date of filing th	is 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 partners	ship. Check the box if applica	able:	
12. If a limited liability company, check	box if manager-managed:	]		
13. This application will be effective upon	n filing.			
1.1/1 fll	J	I. Paul Jullienne, VP, Managing Counse	I & Corporate Secretary 03/2	0/2024
Signature of Authorized Representative	-	Printed Name & Title		Date
I. Corporation Service Company Type/Print Name of Registered Agent		_, consent to serve as the reg	istered agent on behalf	of the business entity.

Corporation Service Company Assistant Secretary

Printed Name

Signature of Registered Agent

## Kentucky - Certificate of Authority Supplemental Information

Business Entity E-mail Address: <a href="mailto:corporatesecretary@unum.com">corporatesecretary@unum.com</a>

## 8. Secretary/Additional Officers & Directors:

Lisa G. Iglesias, Director	1 Fountain Square, Chattanooga, TN 37402		
J. Paul Jullienne, VP, Corporate Secretary	1 Fountain Square, Chattanooga, TN 37402		
Benjamin S. Katz, VP, Treasurer	1 Fountain Square, Chattanooga, TN 37402		
Jennifer D. Peters, AVP, Assistant Treasurer	1 Fountain Square, Chattanooga, TN 37402		
Swapnil Prabha, President & CEO	2211 Congress Street, Portland, ME 04122		
Sandra L. Sincero, CFO	2211 Congress Street, Portland, ME 04122		