



COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

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ADD

Michael G. Adams
Kentucky Secretary of State
Received and Filed:
10/19/2023 10:58 AM
Fee Receipt: \$90.00

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

Certificate of Authority
(Foreign Business Entity)

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 ☐ public benefit corporation
☐ non-profit llc ☐ professional service corporation ☐ other
2. The name of the entity is Out Teach
(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): Out Teach Corporation
(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 Texas
5. The date of organization is September 19, 2006 and the period of duration is _____
(If left blank, duration is considered perpetual.)
6. The mailing address of the entity's principal office is
One Thomas Circle NW, Suite 700, c/o Industrious Washington DC 20005
Street Address City State Zip Code
7. The street address of the entity's registered office in Kentucky is
828 Lane Allen Road #219 Lexington KY 40504
Street Address (No P.O. Box Numbers) City State Zip Code
- and the name of the registered agent at that office is Paracorp Incorporated
8. The names and business addresses of the entity's representatives (secretary, officers and directors, managers, trustees or general partners):
See attachment.

Name	Street or P.O. Box	City	State	Zip Code
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.

Claire Mooney
Signature of Authorized Representative

Claire Mooney, Chief Financial and Operating Officer
Printed Name & Title

10/17/2023
Date

SEE ATTACHED

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

Signature of Registered Agent	Printed Name	Title	Date
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Attachment to Kentucky Certificate of Authority

Out Teach

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

Name	Street or P.O. Box	City	State	Zip Code
Shally Stanley	8280 Greensboro Drive, Ste. 400	McLean	VA	22182
Peggy Brookins	900 11th Street NE, Unit 1	Washington	DC	20002
James Ferri	4617 Roxbury Dr	Bethesda	MD	20814
Tom Fry	306 Cumberland Street	Brooklyn	NY	11238
Kelly Garrett	868 Newport Avenue	St. Louis	MO	63119
John Kovac	1647 Mifflin Place NE	Atlanta	GA	30324
Nicole Levine	8317 Woodhaven Boulevard	Bethesda	MD	20817
Jeanne McCarty	1 Thomas Circle, NW Suite 700	Washington	DC	20005
Teresa Young Bernstein	6622 31st St NW	Washington	DC	20015
Amy Wong	200 Park Avenue, 45th FL	New York	NY	10166
Kelly Hatcher Turner	1040 Spring St, Silver Spring	Maryland	VA	20910
Cynthia Wilson	3907 Badger Forest Dr	Houston	TX	77088
Hank Harris	401 S El Cielo Road, Apt 173	Palm Springs	CA	92262
Juliana Urtubey	501 W. Rosemonte, Dr.	Phoenix	AZ	85027
Claire Mooney	1 Thomas Circle, NW Suite 700	Washington	DC	20005

STATE OF KENTUCKY

REGISTERED AGENT CONSENT FORM

DATE: 10/18/2023

COMPANY NAME: Out Teach Corporation

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated
828 Lane Allen Road, Suite 219
Lexington, KY 40504

Paracorp Incorporated hereby accepts appointment as registered agent for and on behalf of the above-referenced company.



Leticia Herrera, Assistant Secretary
Paracorp Incorporated