

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
Secretary of State
Received and Filed
5/1/2024 12:00:00 AM
Fee receipt: \$90

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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

BEAK & SKIFF APPLE FARMS, INC.

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

4. The date of organization is **6/19/1911** and the period of duration is **perpetual**.

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

4472 Cherry Valley Tpk., Lafayette, NY 13084

6. The street address of the entity's registered office in Kentucky is

421 West Main Street, Frankfort, KY 40601

and the name of the registered agent at that office is **Corporation Service Company**.

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

Officer	Eddie Brennan	4472 Cherry Valley Tpk.	Lafayette	NY	13084
Officer	J. Mack Hueber	4472 Cherry Valley Tpk.	Lafayette	NY	13084
Officer	Jacqueline Coudriet	4472 Cherry Valley Tpk.	Lafayette	NY	13084

8. This application will be effective on **Wednesday, May 1, 2024**.

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

I, **Alix Anast, Assistant Secretary**, consent to sign for **Corporation Service Company** who serves as the **Registered Agent** on behalf of this profit corporation company.