

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
KY Secretary of State

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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: **DERBY CITY AVIATION, LLC**
3. The name of the entity to be used in Kentucky is (if applicable): **N/A**
4. The state or country whose law the entity is organized is **Florida**.
5. The date of organization is **8/24/2015** and the period of duration is **perpetual**.
6. This entity is managed by Members

**7. Principal Office**

2400 S Ocean DR. Unit 7112  
Fort Pierce, FL 34949

**8. Required Representatives**

<b>Member</b>	Roger Stephen Quinn	2400 S Ocean DR Fort Pierce Unit 7112	FL	34949
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**9. Registered Agent/Office**

Karen Ann Quinn  
7801 Spring Farm CT  
Prospect, KY 40059

I, **Karen Ann Quinn**, consent to serve as the **Registered Agent** on behalf of this Entity.  
on Friday, September 22, 2023

As the Authorized Representative, I, **Roger S Quinn**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Member/Manager**