

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

1435656.09

mmoore ADD

Michael G. Adams Kentucky Secretary of State Received and Filed:

3/6/2025 2:37 PM Fee Receipt: \$90.00

P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	The state of the s	Business Entity)		FBE
Pursuant to the provisions of KRS 14A and, for that purpose, submits the follow		applies for authority to transact be	usiness in Kentucky	on behalf of the entity named below
business trust limited partnership non-profit IIc ltd co		profit corporation ed liability company ooperative association essional service corporation	ility company statutory trust public benefit corporation	
2. The name of the entity is Davidson	Technologies, Inc.	name on record with the Secre	etary of State)	
3. The name of the entity to be used in	Kentucky is (if applicable):(0	Only provide if "real name" is u		otherwise, leave blank.)
4. The state or country under whose la			:- Domotual	
5. The date of organization is $05/30/20$	001	and the period of duration	(If left blank, durat	ion is considered perpetual.)
6. The mailing address of the entity's p	rincipal office is			
5300 Redstone Gateway Street Address		Huntsville City	<u>AL</u> State	35808 Zip Code
7. The street address of the entity's reg	sistered office in Kentucky is			40601
306 W. Main Street, Suite 512 Street Address (No P.O. Box Number	re1	Frankfort City	KYSt	tate Zip Code
and the name of the registered agent at		matter - A		2.5 0000
8. The names and business addresses	of the entity's representatives (secretary, officers and directors,		or general partners): SEE ATTACHMENT 35808
Dale Moore	5300 Redstone Gateway Street or P.O. Box	Huntsville	AL State	35808 Zip Code
Name Laura Burke	5300 Redstone Gateway	City Huntsville	AL	35808
Name	Street or P.O. Box	City	State	Zip Code
Mandy Kerce	5300 Redstone Gateway	Huntsville	AL	35808
Name	Street or P.O. Box	City	State	Zip Code
9. If a professional service corporation, and treasurer are licensed in one or mo statement of purposes of the corporation	re states or territories of the Un			
10. I certify that, as of the date of filing t	his application, the above-name	ed entity validly exists under the la	aws of the jurisdiction	n of its formation.
11. If a limited partnership, it elects to b	e a limited liability limited partne	ership. Check the box if applicab	le:	
12. If a limited liability company, check	k box if manager-managed:			
13. This application will be effective upo	n filing.			
Marisha Pressle	4	Marisha Pressley, Corporate	Controller 3/	5/2025
Signature of Authorized Representative ${\cal U}$		Printed Name & Title		Date
, C T Corporation System Type/Print Name of Registered Agent		, consent to serve as the regist	tered agent on beha	If of the business entity.
- 0 : 0 00	**	11		2/0//2025
By: Lenise Dell	Denise B	ell As	st. Secretary	3/06/2025

Printed Name

Title

Date

Signature of Registered Agent

Attachment to Kentucky Officers & Directors

Officer/Director:

1 Full Name: James Lackey Officer/Director: Officer Business Address: 5300 Redstone Gateway City: Huntsville AL State: ZIP Code: 35808 2 Full Name: John Holly Officer/Director: Director Business Address: 5300 Redstone Gateway Huntsville City: State: AL ZIP Code: 35808 3 Full Name: Mike DeMairobus Officer/Director: Director Business Address: 5300 Redstone Gateway City: Huntsville State: AL ZIP Code: 35808 4 Full Name: Rod Steakley Officer/Director: Director Business Address: 5300 Redstone Gateway Huntsville City: State: AL ZIP Code: 35808 5 Full Name: Ron Burgess

Business Address: 5300 Redstone Gateway
City: Huntsville

City: Huntsvi
State: AL
ZIP Code: 35808

6 Full Name: Marisha Pressley

Officer/Director: Officer

Business Address: 5300 Redstone Gateway

Director

City: Huntsville
State: AL
ZIP Code: 35808