

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
Received and Filed

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6/22/2023 8:41:05 AM

Fee receipt: \$90.00

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: **ALLENBUILD INSTRUMENTS L.L.C.**
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 **North Carolina**.
5. The date of organization is **12/6/2018** and the period of duration is **perpetual**.
6. This entity is managed by Members

7. Principal Office

6217 Turning Point Dr
Wake Forest, NC 27587

8. Required Representatives

Member	James Allen	6217 Turning PointWake Forest Dr	NC	27587-78 10
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9. Registered Agent/Office

Northwest Registered Agent LLC
212 N. 2nd St,
STE 100
Richmond, KY 40475

I, **Asher Jurgens**, consent to sign for **Northwest Registered Agent LLC** who serves as the **Registered Agent** on behalf of this Entity.
on Thursday, June 22, 2023

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