

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

L902
1404057.06
Michael G. Adams
Secretary of State
Received and Filed
10/24/2024 12:00:00 AM
Fee receipt: \$90

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 entity is a **limited liability company**.

2. The name of the entity is

Alertline Communications LLC

3. The name of the entity to be used in Kentucky is

Alertline Communications LLC

4. The state or country under whose law the entity is organized is **Utah**.

5. The date of organization is **11/1/2000** and the period of duration is **perpetual**.

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

26 Scenic Hills Cir, North Salt Lake, UT 84054

7. The name of the initial registered agent is

David Porter

and the street address of the entity's initial registered office in Kentucky is

4440 Highway 389, Turners Station, KY 40075

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

Registered Agent	David Porter	4440 Highway 389, Turners Station, KY 40075
Authorized Rep	David Porter	26 Scenic Hills Cir, North Salt Lake, UT 84054

9. This entity is managed by **Members**.

10. This filing will be effective on **Thursday, October 24, 2024**.

I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

Signature of individual signing on behalf of **Authorized Rep:**
David Porter

I, **David Porter**, consent to sign for **David Porter** who serves as
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the Registered Agent on behalf of this entity
24, 2024.

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