

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 **profit corporation**.
2. The name of the entity is: **MANCHESTER LEASING SERVICES, INC.**
3. The state or country whose law the entity is organized is **Missouri**.
4. The date of organization is **7/26/2016** and the period of duration is **perpetual**.

**5. Principal Office**

18173 Edison Ave, Unit G  
CHESTERFIELD, MO 63017

**6. Required Representatives**

<b>Officer</b>	Michael J Rusch	18173 Edison Ave, Chesterfield Unit G	MO	63005
<b>Officer</b>	Benjamin J Carfrae	18173 Edison Ave, Chesterfield Unit G	MO	63005
<b>Secretary</b>	Nick O Desmarais	18173 Edison Ave, Chesterfield Unit G	MO	63005
<b>Officer</b>	Ryan K Barrington-Foote	18173 Edison Ave, Chesterfield Unit G	MO	63005
<b>Director</b>	Darren J Loblaw	18173 Edison Ave, Chesterfield Unit G	MO	63005
<b>Officer</b>	Jess D Rose	18173 Edison Ave, Chesterfield Unit G	MO	63005

**7. Registered Agent/Office**

Corporation Service Company  
421 West Main Street  
Frankfort, KY 40601

I, **Tasha Cooper**, consent to sign for **Corporation Service Company** who serves as the **Registered Agent** on behalf of this Entity.  
on Monday, November 27, 2023

As the Authorized Representative, I, **Jess Rose**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Chief Financial Officer**