

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
Received and Filed
3/13/2024 9:20:21 AM
Fee receipt: \$90.00

Michael G. Adams
Secretary of State
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Frankfort, KY 40602-0718
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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: **KRT, LLC**
3. The name of the entity to be used in Kentucky is (if applicable): **KRT OF KENTUCKY LLC**
4. The state or country whose law the entity is organized is **Tennessee**.
5. The date of organization is **10/3/2014** and the period of duration is **perpetual**.
This Filing is Effective on Wednesday, March 13, 2024
6. This entity is managed by Managers

7. Principal Office

450 PINE RIDGE DRIVE
PARIS, TN 38242

8. Required Representatives

Manager	KRISTINE L KENWORTHY	450 PINE RIDGE DRIVE	PARIS	TN	38242
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9. Registered Agent/Office

CAPITOL CORPORATE SERVICES, INC.
828 LANE ALLEN ROAD
SUITE 219
LEXINGTON, KY 40504

I, **Mary Fink, Asst. Sec.**, consent to sign for **CAPITOL CORPORATE SERVICES, INC.** who serves as the **Registered Agent** on behalf of this Entity.
on Wednesday, March 13, 2024

As the Authorized Representative, I, **KRISTINE L KENWORTHY**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Kristine L. Kenworthy**