# Commonwealth of Kentucky Michael G. Adams, Secretary of State

1373360.06 Michael G. Adams Secretary of State Received and Filed 6/20/2024 12:00:00 AM

Fee receipt: \$90

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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 entity is a **limited liability company**.
- 2. The name of the entity is

#### MARISCOS EL PUERTO DE SAN BLAS ESTILO NAYARIT

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

#### MARISCOS SINALOA LLC

- 4. The state or country under whose law the entity is organized is Indiana.
- 5. The date of organization is 3/3/2020 and the period of duration is perpetual.
- 6. The mailing address of the entity's principal office is

#### 1541 E 10th st, Jeffersonville, IN 47129

7. The name of the initial registered agent is

#### Lorena Rodriguez

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

### 4101 Quiet way, Jeffersonville, KY 40219

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

Member Lorena Rodriguez 1541 e 10th st, C

1541 e 10th st, Clarksville, IN 47129

- 9. This entity is managed by **Members**.
- 10. This application will be effective on Thursday, June 20, 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 **Member: Lorena Rodriguez** 

I, **Lorena Rodriguez**, consent to serve as the Registered Agent on behalf of this entity on Thursday, June 20, 2024.