

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

L902

1381060.06  
Michael G. Adams  
Secretary of State  
Received and Filed  
7/23/2024 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

**Laronja Apts LLC**

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

**Laronja Apts LLC**

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

5. The date of organization is **8/14/2000** and the period of duration is **perpetual**.

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

**5323 W Oberlin Dr, Denver, CO 80235**

7. The name of the initial registered agent is

**Laronja Apts. LLC**

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

**212 N 2nd St Ste 100, Richmond, KY 40475**

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

<b>Registered Agent</b>	Laronja Apts. LLC	212 N 2nd St Ste 100, Richmond, KY 40475
<b>Authorized Rep</b>	Laronja Apts. LLC	212 N 2nd St Ste 100, Richmond, KY 40475
<b>Manager</b>	Karen Caldwell	5323 W Oberlin Dr, Denver, CO 80235

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

10. This application will be effective on **Tuesday, July 23, 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 Representative: Taylor Newman**

I, **Taylor Newman**, consent to sign for **Lar...**  
serves as the Registered Agent on behalf of  
July 23, 2024.

**1381060.06****Michael G. Adams****Secretary of State**

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