

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
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<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: **TRANSPO GROUP USA, INCORPORATED**
3. The name of the entity to be used in Kentucky is (if applicable): **N/A**
4. The state or country whose law the entity is organized is **Washington**.
5. The date of organization is **12/5/2012** and the period of duration is **perpetual**.

7. Principal Office

12131 113th Ave Ne, Suite 203
Kirkland, WA 98034

8. Required Representatives

Secretary	Daniel McKinney	12131 113th Ave NE, Suite 203	Kirkland	WA	98034
Director	Bruce Haldors	12131 113th Ave NE, Suite 203	Kirkland	WA	98034
Officer	Kevin Collins	12131 113th Ave NE, Suite 203	Kirkland	WA	98034
Officer	Michael Swenson	12131 113th Ave NE, Suite 203	Kirkland	WA	98034
Officer	Sarah Brinkerhoff	12131 113th Ave NE, Suite 203	Kirkland	WA	98034

9. Registered Agent/Office

Business Filings Incorporated
306 W. Main St., Ste 512
Frankfort, KY 40601

I, **Chris Das, AVP**, consent to sign for **Business Filings Incorporated** who serves as the **Registered Agent** on behalf of this Entity.
on Monday, March 13, 2023

As the Authorized Representative, I, **Kevin Collins**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **President**