

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
Received and Filed

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Fee receipt: \$90.00

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 **limited liability company**.
2. The name of the entity is: **ORION MISTER LLC**
3. The state or country whose law the entity is organized is **Florida**.
4. The date of organization is **2/27/2023** and the period of duration is **perpetual**.
This Filing is Effective on Tuesday, February 13, 2024
5. This entity is managed by Members

6. Principal Office

200 S. Biscayne Blvd. 7th Floor
Miami, FL 33131

7. Required Representatives

Member	Joseph Sanz	200 S. Biscayne Blvd. 7th Floor	Miami	FL	33131
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8. Registered Agent/Office

Corporation Service Company
421 West Main Street
Frankfort, KY 40601

I, **Kristyn Simpson**, consent to sign for **Corporation Service Company** who serves as the **Registered Agent** on behalf of this Entity.
on Tuesday, February 13, 2024

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