

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: **CLAS MORTGAGE PROCESSING LLC**
3. The state or country whose law the entity is organized is **Florida**.
4. The date of organization is **8/24/2023** and the period of duration is **perpetual**.  
This Filing is Effective on Wednesday, January 17, 2024
5. This entity is managed by Members

**6. Principal Office**

1950 NE 174th ST  
NORTH MIAMI BEACH, FL 33162

**7. Registered Agent/Office**

registered agents inc  
212 n 2nd st  
suite 100  
Richmond, KY 40475

I, **David Roberts**, consent to sign for **registered agents inc** who serves as the **Registered Agent** on behalf of this Entity.  
on Wednesday, January 17, 2024

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