

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

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Michael G. Adams  
KY Secretary of State

Received and Filed

11/18/2022 12:00:00 AM

Fee receipt: \$180.00

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**

**RCA**

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: PARENTSQUARE, INC
3. The name of the entity to be used in Kentucky is (if applicable):
4. It is an entity organized and existing under the laws of the state of Delaware.
5. The date of organization is See Original Certificate of Authority. and the period of duration is perpetual

**Principal Office**

6144 CALLE REAL SUITE 200A  
GOLETA, CA 93117

**Registered Agent Name/Address**

CHRISTINE STEIN  
1070 HUTCHINS LN  
BARDSTOWN, KY 40004

6. As the Authorized Representative, I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Sohit Wadhwa on 11/18/2022
7. As the Registered Agent, I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. CHRISTINE STEIN on 11/18/2022