

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
Received and Filed

8/29/2023 1:23:25 PM

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 **profit corporation**.
2. The name of the entity is: **UNIVERSAL CLAIMS SOLUTIONS, INC.**
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 **Missouri**.
5. The date of organization is **8/3/2023** and the period of duration is **perpetual**.

7. Principal Office

3710 Mueller Road
St. Charles, MO 63301

8. Required Representatives

Secretary	Tom Corbett	3710 Mueller Road St. Charles	MO	63301
Director	Tom Corbett	3710 Mueller Road St. Charles	MO	63301
Director	Daniel Thal	3710 Mueller Road St. Charles	MO	63301
Officer	Daniel Thal	3710 Mueller Road St. Charles	MO	63301

9. Registered Agent/Office

C T Corporation System
306 W. Main Street, Suite 512
Frankfort, KY 40601

I, **Bernadette Baker**, consent to sign for **C T Corporation System** who serves as the **Registered Agent** on behalf of this Entity.
on Tuesday, August 29, 2023

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