# Commonwealth of Kentucky Michael G. Adams, Secretary of St

1177367 1177367 Michael G. J....... KY Secretary of State Received and Filed

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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: QUAVERED 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 Tennessee.
- 5. The date of organization is See Original Certificate of Authority. and the period of duration is perpetual

#### **Principal Office**

65 MUSIC SQ W NASHVILLE, TN 37203

### Registered Agent Name/Address

Corporation Service Company 421 West Main Street Frankfort, KY 40601

#### **Current Officers**

David Mastran	65 Music Sq W, Nashville, TN, 37203
Donna Mastran	65 Music Square West, Nashville, TN 37203
Graham Hepburn	65 Music Square West, Nashville, TN 37203
Susannah Kvasnicka	65 Music Square West, Nashville, TN 37203
	Donna Mastran Graham Hepburn

- 6. Donna Mastran, Secretary, on 12/21/2023
- 7. I, Corporation Service Company, consent to serve as the registered agent on behalf of the this entity on 12/21/2023