

COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

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Michael G. Adams Kentucky Secretary of State Received and Filed:

3/29/2022 10:59 AM Fee Receipt: \$90.00

Division of Business Filings	Certificate of	Authority		
P.O. Box 718	(Foreign Busines			
Frankfort, KY 40602 (502) 564-3490	, ,	• ,		
www.sos.ky.gov	·			
Pursuant to the provisions of KRS 14A and, for that purpose, submits the follow	- 030 the undersigned hereby applies for ing statements:	or authority to transact bu	isiness in Kentucky c	on behalf of the entity named below
4. The optiminal profit corner	ation nonprofit con	oprofice 1	nzofessional liz	nited liability company
1. The entity is a: profit corpora			professional limited liability company statutory trust	
business tru	<del></del>		other	
limited partn		re association	L otner	
non-profit llc		service corporation		
2. The name of the entity is Project Ri	ck II Investment, LLC		· · · · · · · · · · · · · · · · · · ·	,
(The	name must be identical to the name o	n record with the Secre	etary of State.)	
3. The name of the entity to be used in	Kentucky is (if applicable):(Only pro-	vide if "real name" is ur	navailable for use; o	therwise, leave blank.)
4. The state or country under whose law				
5. The date of organization is February 10, 2022 and the period of duration is				
6. The molling address of the antitude of	ringinal office is	ļ	(If left blank, duratio	on is considered perpetual.)
6. The mailing address of the entity's p 1125 W. Eighth Street, Suite 100	incipal office is	Cincinnati	ОН	45203
Street Address		City	State	Zip Code
	takanad affina in Kamtusku is			•
<ol> <li>The street address of the entity's reg</li> <li>246 Foote Avenue</li> </ol>	istered office in Kentucky is	Bellevue	КY	41073
Street Address (No P.O. Box Number	sì	City	Sta	
*	·	•		•
	that office is MANLEY BURKE, L			•
8. The names and business addresses	of the entity's representatives (secretary	/, officers and directors, r	nanagers, trustees o	r general partners):
Jacob Warm	1125 W. Eighth Street, Suite 100	Cincinnati	OH	45203
Name	Street or P.O. Box	City	State	Zip Code
Name	Street or P.O. Box	City	State	Zip Code
Name	Street or P.O. Box	City	State	Zip Code
9. If a professional service corporation, and treasurer are licensed in one or mo statement of purposes of the corporation	all the individual shareholders, not less t re states or territories of the United State n.	han one half (1/2) of the one or District of Columbia	directors, and all of the to render a profession	ne officers other than the secretary mai service described in the
10. I certify that, as of the date of filing t	his application, the above-named entity	validly exists under the la	ws of the jurisdiction	of its formation.
11. If a limited partnership, it elects to b	e a limited liability limited partnership. C	Check the box if applicable	e: 🔲	
12. If a limited liability company, chec	k box if manager-managed:			
13. This application will be effective upon	n filing.		,	7/10/00
	Jacob T	Warm, Member Printed Name & Title		Date
Signature of Authorized Representative		ranteu name or mue		Date
MANLEY BURKE, LPA, consent to serve as the registered agent on behalf of the business entity.				
Type/Print Name of Registered Agent		,		
3v. AM (. //	Micah 5	. Kanasi	Darther	3/28/22
Signature of Registered Agent	Printed Name	TI		Date Date

## UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Frank LaRose, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show PROJECT RICK II INVESTMENT, LLC, an Ohio Limited Liability Company, Registration Number 4816697, was organized in the State of Ohio on February 10, 2022, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 28th day of March, A.D. 2022.

**Ohio Secretary of State** 

Validation Number: 202208705014