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

P101
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Michael G. Adams
Secretary of State
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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**

**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 entity is a **profit corporation**.
- 2. The name of the entity is

### **Djerf Avenue Corporation**

3. The name of the entity to be used in Kentucky is

#### **Djerf Avenue Corporation**

- 4. The state or country under whose law the entity is organized is **Delaware**.
- 5. The date of organization is 9/15/2021 and the period of duration is perpetual.
- 6. The mailing address of the entity's principal office is

#### 150 N Michigan Ave Ste 1950, Chicago, IL 60601

7. The name of the initial registered agent is

#### **CT Corporation**

and the street address of the entity's initial registered office in Kentucky is

#### 306 W Main Street, Frankfort, KY 40601

8. The names and business addresses of the entity's representatives:

Registered Agent	CT Corporation	306 W Main Street, Frankfort, KY 40601
Accountant	Ben Miller	150 N Michigan Ave Ste 1950, Chicago, IL 60601
Accountant	Ben Miller	150 N Michigan Ave Ste 1950, Chicago, IL 60601
Officer	Rasmus Johansson	150 N Michigan Ave Ste 1950, Chicago, IL 60601
Authorized Rep	Ben Miller	150 N Michigan Ave Ste 1950, Chicago, IL 60601
Officer	Rasmus Johansson	150 N Michigan Ave Ste 1950, Chicago, IL 60601

9. This application will be effective on Wednesday, July 17, 2024.

I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

Signature of individual signing on behalf of Authorized Rep: Ben

Miller

I, **CT Corporation**, consent to sign for **CT C** serves as the Registered Agent on behalf of Wednesday, July 17, 2024.

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