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

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: GEARJOT INC.

3. The name of the entity to be used in Kentucky is (if applicable): **GEARJOT OF KENTUCKY INC.**

4. The state or country whose law the entity is organized is **Delaware**.

5. The date of organization is **11/14/2023** and the period of duration is **perpetual**.

6. Principal Office					
P.O. Box 728					
Lexington, KY 40588					
7. Required Represer	ntatives				
Officer	David Macfarlan	P.O. Box 728	Lexington	KY	40588
8. Registered Agent/C	Office				
Richard H. Mains					
326 S Broadway					
Lexington, KY 40508				3 //	

I, **Richard H. Mains**, consent to serve as the **Registered Agent** on behalf of this Entity. on Thursday, January 4, 2024

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

FBE

1331269 **1331269** Michael G. A.

1/4/2024 2:10:08 PM

KY Secretary of State Received and Filed

Fee receipt: \$90.00