

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
Received and Filed
7/21/2022 1:24:25 PM
Fee receipt: \$90.00

Michael G. Adams
Secretary of State
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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 limited liability company.
2. The name of the entity is: TESTTEST OUTOFSTATE LLC
3. The name of the entity to be used in Kentucky is (if applicable): TESTTEST OUTOFSTATE LLC
4. The state or country whose law the entity is organized is **Delaware**.
5. The date of organization is **7/21/2022** and the period of duration is **perpetual**.

6. Principal Office

123 Main Street
Frankfort, KY 40601

7. Registered Agent/Office

David L. Dukes
123 Main Street
Frankfort, KY 40601

8. Authorized Representatives

Leon Russell	123 Main Street	Delaware City	DE	19706
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9. This entity is a limited liability company, that is managed by a manager.
10. This application will be effective upon filing.
11. As the Authorized Representative, I, **DLDukes**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Owner**

I, **David L. Dukes**, consent to serve as the Registered Agent on behalf of the limited liability company.
on Thursday, July 21, 2022