

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
Received and Filed

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Fee receipt: \$90.00

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 business entity is a **profit corporation**.
2. The name of the entity is: **WELLSAID LABS, INC.**
3. The state or country whose law the entity is organized is **Washington**.
4. The date of organization is **8/28/2018** and the period of duration is **perpetual**.
This Filing is Effective on Wednesday, March 6, 2024

5. Principal Office

113 Cherry St
Ste 52562
Seattle, WA 98104

6. Registered Agent/Office

Registered Agent Solutions, Inc.
828 Lane Allen Road
Suite 219
Lexington, KY 40504

I, **Ronald A Zanetti**, consent to sign for **Registered Agent Solutions, Inc.** who serves as the **Registered Agent** on behalf of this Entity.
on Wednesday, March 6, 2024

As the Authorized Representative, I, **Ronald A Zanetti**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **VP of Finance**