Commonwealth of Kentucky Michael G. Adams, Secretary of State

1408370.06 Michael G. Adams Secretary of State Received and Filed

11/12/2024 12:00:00 AM Fee receipt: \$90

tificate of Authority FBE

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 entity is a **limited liability company**.
- 2. The name of the entity is

Cosmic Vending IIc

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

Cosmic Vending LLC

- 4. The state or country under whose law the entity is organized is **Ohio**.
- 5. The date of organization is 9/3/2024 and the period of duration is perpetual.
- 6. The mailing address of the entity's principal office is

422 W 12th St, Newport, KY 41071

7. The name of the initial registered agent is

Jesse Kleinhenz

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

422 W 12th St, Newport, KY 41071

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

Registered AgentJesse Kleinhenz422 W 12th St, Newport, KY 41071Authorized RepJesse Kleinhenz3819 Meyerfeld Ave, Cheviot, OH 45211

- 9. This entity is managed by **Members**.
- 10. This filing will be effective on Tuesday, November 12, 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: Jesse Kleinhenz**

I, **Jesse Kleinhenz**, consent to sign for **Jesse Kleinhenz** who Page 1 of 2

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serves as the Registered Agent on behalf of November 12, 2024.

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