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Michael G. Adams Kentucky Secretary of State Received and Filed: 11/2/2022 10:53 AM Fee Receipt: \$0.00



COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Statement of Re (Domestic or Fore		f Registered Agent s Entity)	SRA	
Pursuant to the provisions of resignation of registered agent a				gned applies for	
_{1. I,} Legalinc Corpor	ate Services, Inc).		, do hereby	
resign as registered age	•				
2. The business entity which I a	am resigning from is	LWELL LLC			
z. The business shary which he	(The name	ne must be identical	to the name on record with the Se	cretary of State.)	
x a limite a limite	oration (KRS 271B, KRS 2 ed liability company (KRS 2 ed partnership (KRS 362); ed liability partnership (KRS ness trust (KRS 386)	75);			
4. The business entity was orga	anized and exists in the sta	te or country of _	Kentucky	·	
5. The mailing address of the re	esigning agent:				
9900 Corporate Campus [Or. Ste 3000 Lou	uisville	KY	40223	
Street Address or Post Office Box Nu	mbers C	ity	State	Zip	
 The agency appointment sha the date on which the statem declare under penalty of perjuin 	ent is filed.		·	he 31 st day after	
al a For	F	Erik Treutlein	October	24, 2022	
Signature of Registered Agent		rinted Name	Date	Date	