



COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

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ADD
Michael G. Adams
Kentucky Secretary of State
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Division of Business Filings
P.O. Box 718
Frankfort, KY 40602
(502) 564-3490
www.sos.ky.gov

Certificate of Authority
(Foreign Business Entity)

Pursuant to the provisions of KRS 14A - 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: profit corporation nonprofit corporation professional limited liability company
 business trust limited liability company statutory trust
 limited partnership ltd cooperative association other
 non-profit llc professional service corporation

2. The name of the entity is Project Rick II Partnership, LLC
(The name must be identical to the name on record with the Secretary of State.)

3. The name of the entity to be used in Kentucky is (if applicable): _____
(Only provide if "real name" is unavailable for use; otherwise, leave blank.)

4. The state or country under whose law the entity is organized is Ohio

5. The date of organization is February 10, 2022 and the period of duration is _____
(If left blank, duration is considered perpetual.)

6. The mailing address of the entity's principal office is
1125 W. Eighth Street, Suite 100 Cincinnati OH 45203
Street Address City State Zip Code

7. The street address of the entity's registered office in Kentucky is
246 Foote Avenue Bellevue KY 41073
Street Address (No P.O. Box Numbers) City State Zip Code

and the name of the registered agent at that office is MANLEY BURKE, LPA c/o MICAH KAMRASS

8. The names and business addresses of the entity's representatives (secretary, officers and directors, managers, trustees or general partners):

Name	Street or P.O. Box	City	State	Zip Code
Jacob Warm	1125 W. Eighth Street, Suite 100	Cincinnati	OH	45203

9. If a professional service corporation, all the individual shareholders, not less than one half (1/2) of the directors, and all of the officers other than the secretary and treasurer are licensed in one or more states or territories of the United States or District of Columbia to render a professional service described in the statement of purposes of the corporation.

10. I certify that, as of the date of filing this application, the above-named entity validly exists under the laws of the jurisdiction of its formation.

11. If a limited partnership, it elects to be a limited liability limited partnership. Check the box if applicable:

12. If a limited liability company, check box if manager-managed:

13. This application will be effective upon filing.

[Signature] Jacob Warm, Member 3/28/22
Signature of Authorized Representative Printed Name & Title Date

I, MANLEY BURKE, LPA, consent to serve as the registered agent on behalf of the business entity.
Type/Print Name of Registered Agent

By: [Signature] Micah E. Kamrass Partner 3/28/22
Signature of Registered Agent Printed Name Title Date

UNITED STATES OF AMERICA
STATE OF OHIO
OFFICE OF THE SECRETARY OF STATE

I, Frank LaRose, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show PROJECT RICK II PARTNERSHIP, LLC , an Ohio Limited Liability Company, Registration Number 4816722, was organized in the State of Ohio on February 10, 2022, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 28th day of March, A.D. 2022.

A handwritten signature in blue ink that reads "Frank LaRose".

Ohio Secretary of State

Validation Number: 202208705016