

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

L902

1422073.06
Michael G. Adams
Secretary of State
Received and Filed
1/15/2025 12:00:00 AM
Fee receipt: \$90

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 entity is a **limited liability company**.

2. The name of the entity is

NEXT DOOR LENDING LLC

3. The state or country under whose law the entity is organized is **Michigan**.

4. The date of organization is **6/26/2019** and the period of duration is **perpetual**.

5. The mailing address of the entity's principal office is

30200 Telegraph Road Suite 105, Bingham Farms, MI 48025

6. The name of the initial registered agent is

Telos Legal Corp.

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

828 Lane Allen Rd Ste 219, Lexington, KY 40504

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

| | | |
|---------------|-----------------|---|
| Member | Doug Liska | 30200 Telegraph Road Suite 105, Bingham Farms, MI 48025 |
| Member | Ekumene Lysonge | 30200 Telegraph Road Suite 105, Bingham Farms, MI 48025 |
| Member | Nicolas Tatum | 30200 Telegraph Road Suite 105, Bingham Farms, MI 48025 |

8. This entity is managed by **Members**.

9. This filing will be effective on **Wednesday, January 15, 2025**.

This entity is **NOT** a tobacco retailer as defined by KRS 438.305(9).

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 **Secretary: Ekumene Lysonge**

I, **Telos Legal Corp.**, consent to sign for Te
serves as the Registered Agent on behalf of
Wednesday, January 15, 2025.

1422073.06**Michael G. Adams****Secretary of State**

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