

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
KY Secretary of State  
Received and Filed

1/16/2024 1:01:51 AM

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 **limited liability company**.
2. The name of the entity is: **NEZEZA FARMS LCC**
3. The name of the entity to be used in Kentucky is (if applicable): **NEZEZA DISTRIBUTORS LLC**
4. The state or country whose law the entity is organized is **USA**.
5. The date of organization is **1/16/2024** and the period of duration is **perpetual**.  
This Filing is Effective on Tuesday, January 16, 2024
6. This entity is managed by Members

**7. Principal Office**

645 BADEN LANE  
BOWLING GREEN, KY 42104

**8. Required Representatives**

<b>Member</b>	Jean D Gumirakiza	5530 Woodburn Allen Springs Road	Bowling Green	KY	42104
<b>Member</b>	Jean De Dieu Hakizimana	5530 Woodburn Allen Springs Road	Bowling Green	KY	42104

**9. Registered Agent/Office**

Jean Dominique Gumirakiza  
5530 Woodburn Allen Springs Road  
Bowling Green, KY 42104

I, **Jean Dominique Gumirakiza**, consent to serve as the **Registered Agent** on behalf of this Entity.  
on Tuesday, January 16, 2024

As the Authorized Representative, I, **Jean Dominique Gumirakiza**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Member**