

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
Received and Filed

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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 **profit corporation**.
2. The name of the entity is: **SAFEWAY DISTRIBUTORS INC**
3. The state or country whose law the entity is organized is **Florida**.
4. The date of organization is **1/30/2014** and the period of duration is **perpetual**.
This Filing is Effective on Thursday, March 14, 2024

5. Principal Office

15851 SW 41st St
Suite 600
Davie, FL 33331

6. Required Representatives

Officer	Michael Bleich	15851 SW 41st St, STE 600	Davie	FL	33331
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7. Registered Agent/Office

Corporate Creations Network Inc
101 North Seventh St
Jefferson, KY 40202

I, **Corporate Creations**, consent to sign for **Corporate Creations Network Inc** who serves as the **Registered Agent** on behalf of this Entity.
on Thursday, March 14, 2024

As the Authorized Representative, I, **Amanda Biggart**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Corporate VP of Finance**