

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
Secretary of State
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Michael G. Adams
Secretary of State
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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 **profit corporation**.

2. The name of the entity is

COLEMAN PERFORMANCE SOLUTIONS, INC.

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

4. The date of organization is **8/19/2014** and the period of duration is **perpetual**.

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

2517 County Road 600 E, Dewey, IL, 61840, USA Dewey IL 61840, IL - Dewey, IL 61840

6. The name of the initial registered agent is

Coleman Performance Solutions, Inc.

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

42 Piney Wood Road, Cadiz, KY 42211

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

Officer Christopher B Coleman 42 Piney Wood Road, Cadiz, KY 42211

8. This application will be effective on **Tuesday, July 23, 2024**.

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 **Director: Christopher Coleman**

I, **Christopher Coleman**, consent to sign for **Coleman Performance Solutions, Inc.** who serves as the Registered Agent on behalf of this entity on Tuesday, July 23, 2024.