

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
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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: **BLUESTONE KY GROUP LLC**
3. The name of the entity to be used in Kentucky is (if applicable): **N/A**
4. The state or country whose law the entity is organized is **Nevada**.
5. The date of organization is **12/5/2020** and the period of duration is **perpetual**.
6. This entity is managed by Managers

7. Principal Office

5150 Mae Anne Ave
Ste 405 #5098
Reno, NV 89523

8. Required Representatives

Manager	Lauren Thew	5150 Mae Anne Ave, Ste 405 #5098	Reno	NV	89523
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9. Registered Agent/Office

Registered Agent Solutions Inc
828 Lane Allen Rd
Ste 219
Lexington, KY 40504

I, **Registered Agent Solutions Inc**, consent to sign for **Registered Agent Solutions Inc** who serves as the **Registered Agent** on behalf of this Entity.
on Tuesday, March 7, 2023

As the Authorized Representative, I, **Lauren Thew**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Manager**