

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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1420876.09
Michael G. Adams
Secretary of State
Received and Filed
1/10/2025 12:00:00 AM
Fee receipt: \$90

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 **nonprofit corporation**.

2. The name of the entity is

ZERO OVERDOSE CORP

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

4. The date of organization is **9/20/2019** and the period of duration is **perpetual**.

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

241 Grist Mill Road, Tillson, NY 12486

6. The name of the initial registered agent is

Registered Agents Inc.

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

212 N. 2nd Street, STE 100, Richmond, KY 40475

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

Director Tom McCarry 241 Grist Mill Road, Tillson, NY 12486

8. This filing will be effective on **Friday, January 10, 2025**.

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 **Chief Executive Officer: Tom McCarry**

I, **David Roberts, Assistant Secretary**, consent to sign for **Registered Agents Inc.** who serves as the Registered Agent on behalf of this entity on Friday, January 10, 2025.