

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 **profit corporation**.
2. The name of the entity is: **BARKING DOGS INC**
3. The name of the entity to be used in Kentucky is (if applicable):
4. The state or country whose law the entity is organized is **Indiana**.
5. The date of organization is **5/21/1996** and the period of duration is **perpetual**.

**7. Principal Office**

17810 Half Moon Lane Apt K  
Cornelius, NC 28031

**8. Required Representatives**

<b>Officer</b>	Maureen Kennedy	588 Morven Park Dr	Walton	KY	41094
<b>Officer</b>	Mary Kennedy	17810 Half Moon Lane #K	Cornelius	NC	28031

**9. Registered Agent/Office**

Maureen Kennedy  
588 Morven Park Dr  
Walton, KY 41094

I, **Maureen Kennedy**, consent to serve as the **Registered Agent** on behalf of this Entity.  
on Thursday, December 22, 2022

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