

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  
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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 business entity is a **nonprofit corporation**.
2. The name of the entity is: **SOLDIERS FOR CHRIST MOTORCYCLE MINSTRIES**
3. The name of the entity to be used in Kentucky is (if applicable): **SOLIDERS FOR CHRIST MOTORYCLE MINISTRIES CORP.**
4. The state or country whose law the entity is organized is **Texas**.
5. The date of organization is **12/20/2023** and the period of duration is **perpetual**.

**6. Principal Office**

2410 NEW HARTFORD RD  
OWENSBORO, KY 42303

**7. Registered Agent/Office**

SAMUEL BUCK  
628 MAPLE HEIGHTS AVE  
OWENSBORO, KY 42303

I, **SAMUEL BUCK**, consent to serve as the **Registered Agent** on behalf of this Entity.  
on Thursday, December 21, 2023

As the Authorized Representative, I, **SAMUEL BUCK**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **CHAPTER OFFICER**