

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
KY Secretary of State  
Received and Filed

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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: **SHARP CARTS REAL ESTATE HOLDING**
3. The name of the entity to be used in Kentucky is (if applicable): **SHARP CARTS REAL ESTATE HOLDING LLC**
4. The state or country whose law the entity is organized is **Delaware**.
5. The date of organization is **5/20/2020** and the period of duration is **perpetual**.
6. This entity is managed by Managers

**7. Principal Office**

121 Carroll Knicely Drive  
Glasgow, KY 42141

**8. Required Representatives**

<b>Manager</b>	Nathan Freeland	121 Caroll Knicely Glasgow Drive	KY	42141
<b>Manager</b>	David Freeland	121 Carroll KnicelyGlasgow Drive	KY	42141

**9. Registered Agent/Office**

National Registered Agents, Inc.  
306 W. Main Street St. 512  
Frankfort, KY 40601

I, **National Registered Agents, Inc.**, consent to sign for **National Registered Agents, Inc.** who serves as the **Registered Agent** on behalf of this Entity.  
on Thursday, August 10, 2023

As the Authorized Representative, I, **Susan R. McMaster**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Authorized Agent**