

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
Secretary of State
Received and Filed
4/15/2024 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 **limited liability company**.
2. The name of the entity is
INSIGHT LPR LLC
3. The state or country under whose law the entity is organized is **Mississippi**.
4. The date of organization is **9/28/2018** and the period of duration is **perpetual**.
5. The mailing address of the entity's principal office is
1014 HWY 471, Brandon, MS 39042
6. The street address of the entity's registered office in Kentucky is
306 W.Main Street, Suite 512, Frankfort, KY 40601
and the name of the registered agent at that office is **C T Corporation System**.

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

Manager	John Nethery	2909 Alton Rd	Fort Worth	TX	76109
Organizer	John Nethery	2909 Alton Rd	Fort Worth	TX	76109
Manager	Jason Lynch	22635 Brookdale	Farmington	MI	48336
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Organizer	Jason Lynch	22635 Brookdale	Farmington	MI	48336
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8. This entity is managed by **Managers**.
9. This application will be effective on **Monday, April 15, 2024**.

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

I, **Jason Lynch**, consent to sign for **C T Corporation System** who serves as the **Registered Agent** on behalf of this Entity.