

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
Secretary of State  
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Michael G. Adams  
Secretary of State  
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Frankfort, KY 40602-0718  
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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

**Eagle Ministries, Inc.**

3. The name of the entity to be used in Kentucky is

**LPMA / EAGLE MINISTRIES INC.**

4. The state or country under whose law the entity is organized is **Florida**.

5. The date of organization is **7/2/2004** and the period of duration is **perpetual**.

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

**80890 Cleary Blvd #815, Plantation, FL 33324**

7. The name of the initial registered agent is

**Timm J Finfrock**

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

**111 Dewey Dr. Suite E, Nicholasville, KY 40356**

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

**Director**                      Danny R Thomas                      80890 Cleary Blvd, Plantation, FL 33324

9. This application will be effective on **Monday, July 8, 2024**.

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 **President: Danny R Thomas**

I, **Timm J Finfrock**, consent to serve as the Registered Agent on behalf of this entity on Monday, July 8, 2024.