

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

Michael G. Adams
Secretary of State
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Certificate of Authority

FBE

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Michael G. Adams
Secretary of State
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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

SKYPORT 275 OWNER'S ASSOCIATION, INC.

3. The state or country under whose law the entity is organized is **Indiana**.

4. The date of organization is **6/30/1998** and the period of duration is **perpetual**.

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

1111 Meta Drive, Cincinnati, OH 45237

6. The street address of the entity's registered office in Kentucky is

421 West Main Street, Frankfort, KY 40601

and the name of the registered agent at that office is **Corporation Service Company**.

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

Officer	Dan Colletto	8760 Global Way, West Chester, OH 45069
Officer	Thomas Gusweiler	8760 Global Way, West Chester, OH 45069
Officer	Matt Daniels	8760 Global Way, West Chester, OH 45069

8. This application will be effective on **Wednesday, May 22, 2024**.

As the Authorized Representative, I, **John E. Neyer**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Officer**

I, **Jawann Latney**, consent to sign for **Corporation Service Company** who serves as the **Registered Agent** on behalf of this nonprofit corporation company.