

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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Fee receipt: \$130.00

Michael G. Adams
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
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<http://www.sos.ky.gov>

Certificate of Authority

RCA

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: NWPI-KENTUCKY LLC
3. The name of the entity to be used in Kentucky is (if applicable):
4. It is an entity organized and existing under the laws of the state of Oregon.
5. The date of organization is See Original Certificate of Authority. and the period of duration is perpetual

Principal Office

PO Box 1784
North Plains, OR 97133

Registered Agent Name/Address

Craig Pond
2029 Buck Lane
Lexington, KY 40511

Members/Managers

Member Peter Cummings PO Box 1784, North Plains, OR 97133

6. Craig Pond, General Manager, on 10/24/2023

7. I, Craig Pond, consent to serve as the registered agent on behalf of the this entity on 10/24/2023