Commonwealth of Kentucky Michael G. Adams, Secretary of St

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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 **profit corporation**.
- 2. The name of the entity is: LEASELOCK CLAIMS SERVICES, INC.
- 3. The state or country whose law the entity is organized is **Delaware**.
- 4. The date of organization is **10/28/2019** and the period of duration is **perpetual**. This Filing is Effective on Monday, March 18, 2024

5. Principal Office

5050 Quorum Drive Dallas, TX 75254

6. Required Representatives

O.C	01. 0 1	5050.0	Б. II	TV	75254
Officer	Oliver Gratry	5050 Quorum	Dallas	IX	75254
		Drive		11 \ \ \ \ \	

7. Registered Agent/Office

Corporate Creations Network Inc. 101 North Seventh Street Louisville, KY 40202

I, **Marie Edwards**, consent to sign for **Corporate Creations Network Inc.** who serves as the **Registered Agent** on behalf of this Entity.
on Monday, March 18, 2024

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