

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

L902

1397384.06
Michael G. Adams
Secretary of State
Received and Filed
9/24/2024 12:00:00 AM
Fee receipt: \$90

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 entity is a **limited liability company**.

2. The name of the entity is

DISPEL LLC

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

4. The date of organization is **2/6/2015** and the period of duration is **perpetual**.

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

61 Greenpoint Avenue, Brooklyn, NY 11222

6. The name of the initial registered agent is

Corporation Service Company

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

421 West Main Street, Frankfort, KY 40601

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

Manager	Ethan Schmertzler	61 Greenpoint Avenue, Brooklyn, NY 11222
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Organizer	Ethan Schmertzler	61 Greenpoint Avenue, Brooklyn, NY 11222
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Manager	Ian Schmertzler	61 Greenpoint Avenue, Brooklyn, NY 11222
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Organizer	Ian Schmertzler	61 Greenpoint Avenue, Brooklyn, NY 11222
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8. This entity is managed by **Managers**.

9. This filing will be effective on **Tuesday, September 24, 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 **Controller: Julian Greene**

I, **Brittany Aunet, Assistant Secretary**, consent to sign for **Corporation Service Company** who serves as the Registered

Agent on behalf of this entity on Tuesday, Se

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