

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
Secretary of State  
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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 **profit corporation**.

2. The name of the entity is

**IDIRECT P INC.**

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

4. The date of organization is **3/18/2024** and the period of duration is **perpetual**.

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

**10801 Starkey Road suite 18, Seminole, FL 33777**

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

**212 N. 2nd St., STE 100, Richmond, KY 40475**

and the name of the registered agent at that office is **Registered Agents Inc.**

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

<b>Director</b>	Mathieu Milliand	10801 Starkey Road	Seminole/Largo/St. Petersburg	FL	33777
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8. This application will be effective on **Tuesday, May 21, 2024**.

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

I, **David Roberts**, consent to sign for **Registered Agents Inc** who serves as the **Registered Agent** on behalf of this profit corporation company.