

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

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Michael G. Adams Kentucky Secretary of State Received and Filed: 3/22/2023 2:34 PM Fee Receipt: \$90.00

Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov

V

Certificate of Authority

(Foreign Business Entity)

Pursuant to the provisions of KRS 14A – 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 | nonprofit corporation | professional limite | d liability company |
|--|---|---|--------------------------|
| business trust | limited liability company | statutory trust | a naomy company |
| limited partnership | Itd cooperative association | public benefit corp | oration |
| non-profit IIc | professional service corporation | other | |
| 2. The name of the entity is <u>PATTERSON TECHNOLOGY</u> | | | |
| | o the name on record with the Secre | tary of State.) | |
| 3. The name of the entity to be used in Kentucky is (if applicable): | | , | |
| 4. The state or country under whose law the entity is organized is 5. The date of organization is $03/19/2002$ | (Only provide if "real name" is un MINNESOTA and the period of duration | | wise, leave blank.) |
| 6. The mailing address of the entity's principal office is 1031 MENDOTA HEIGHTS ROAD | ST. PAUL | lf left blank, duration is | considered perpetual.) |
| Street Address | City | MN State | <u>55120</u> |
| 7. The street address of the entity's registered office in Kentucky is 306 W. Main Street, Suite 512 | | KY | Zip Code 40601 |
| Street Address (No P.O. Box Numbers) | City | State | Zip Code |
| and the name of the registered agent at that office is $_\mathrm{C}~\mathrm{T}~\mathrm{Corport}$ | ration System | | p ••••• |
| 8. The names and business addresses of the entity's representativ | es (secretary, officers and directors, m | anagers trustees or gen | eral partners): |
| Donald J. Zurbay 1031 Mendota Heights | | MN | |

| Donald J. Zurbay | 1031 Mendota Heights Road | St. Paul | MN | 55120 |
|----------------------|---------------------------|----------|-------|----------|
| Name | Street or P.O. Box | City | State | Zip Code |
| Les B. Korsh Name | 1031 Mendota Heights Road | St. Paul | MN | 55120 |
| Kevin M. Barry | Street or P.O. Box | City | State | Zip Code |
| Name | 1031 Mendota Heights Road | St. Paul | MN | 55120 |
| | Street or P.O. Box | City | State | Zip Code |

9. If a professional service corporation, all the individual shareholders, not less than one half (1/2) of the directors, and all of the officers other than the secretary and treasurer are licensed in one or more states or territories of the United States or District of Columbia to render a professional service described in the statement of purposes of the corporation.

10. I certify that, as of the date of filing this application, the above-named entity validly exists under the laws of the jurisdiction of its formation.

11. If a limited partnership, it elects to be a limited liability limited partnership. Check the box if applicable:

12. If a limited liability company, check box if manager-managed:

13. This application will be effective upon filing.

Signature of Authorized Representative

Les B. Korsh, Corporate Secretary Printed Name & Title

March 21, 2023 Date

| I, <u>C T Corporation System</u> Type/Print Name of Registered Agent | , consent to serve | e as the registered agent on behalf o | of the business entity. |
|---|--|---------------------------------------|-------------------------|
| By: By: Signature of Boustier Agent | Kimberly Bagget, Asst. Printed Name | Secretary | 3/21/23 Date |