

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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Michael G. Adams  
KY Secretary of State  
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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: **PVS TRANSPORTATION, INC.**
3. The state or country whose law the entity is organized is **Michigan**.
4. The date of organization is **10/15/1996** and the period of duration is **perpetual**.  
This Filing is Effective on Monday, March 4, 2024

**5. Principal Office**

11001 Harper Avenue  
Detroit, MI 48213

**6. Required Representatives**

<b>Director</b>	Timothy F. Nicholson	10900 Harper Avenue	Detroit	MI	48213
<b>Officer</b>	Timothy F. Nicholson	10900 Harper Avenue	Detroit	MI	48213
<b>Officer</b>	John K. Cannon	11001 Harper Avenue	Detroit	MI	48213
<b>Secretary</b>	Jonathan S. Taub	10900 Harper Avenue	Detroit	MI	48213
<b>Officer</b>	Milisav M. Bulatovic	10900 Harper Avenue	Detroit	MI	48213

**7. Registered Agent/Office**

C T Corporation System  
306 W. Main Street  
Suite 512  
Frankfort, KY 40601

I, **C T Corporation System**, consent to sign for **C T Corporation System** who serves as the **Registered Agent** on behalf of this Entity.  
on Monday, March 4, 2024

As the Authorized Representative, I, **Jonathan S. Taub**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Secretary**