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AMD

Michael G. Adams Kentucky Secretary of State Received and Filed: 9/4/2024 3:48 PM Fee Receipt: \$40.00



## COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Amended Certificate of Authority (Foreign Business Entity)	FCA
Pursuant to the provisions of Kl authority on behalf of the entity r	RS Chapter KRS 14A.9 - 040 the undersigned hereby applies for an amer named below and, for that purpose, submits the following statements:	ided certificate of
1. The business entity is:	profit corporation Improfit corporation   professional service corporation Imited liability company   limited liability company Imited partnership   professional limited liability company Imited partnership   limited cooperative association Imited partnership   other Imited partnership	
2. The name of the company is:	CLEARY BENEFITS GROUP, INC. (The name must be identical to the name on record with the Secretary of State	e.)
3. It is an entity organized and e	xisting under the laws of the state or country of Connecticut	
	o transact business in Kentucky on July 6, 2009	*
5. The entity has changed its (ch	eck all that apply)	
Domicile name t	o BALLISTA HOLDINGS, INC.	
Name to be use	d in Kentucky to	
Jurisdiction of or	rganization to	
Period of duration	n	
Form of organization	ation	
Management typ	be: Member managed Manager managed	
6. This application will be effective	ve upon filing.	

I declare underpenalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

	E. Brian Cleary	President	9/4/2024
Signature of Authorized Representa	tive Printed Name	Title	Date