

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
Received and Filed

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Fee receipt: \$90.00

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 **limited liability company**.
2. The name of the entity is: **LUND OPSAHL LLC**
3. The name of the entity to be used in Kentucky is (if applicable): **N/A**
4. The state or country whose law the entity is organized is **Washington**.
5. The date of organization is **12/14/2011** and the period of duration is **perpetual**.
6. This entity is managed by Managers

7. Principal Office

1215 4TH AVE SUITE 1200
SEATTLE, WA 98161

8. Required Representatives

Manager	JEREMIAH BOWLES	1215 4TH AVE SUITE 1200	SEATTLE	WA	98161
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9. Registered Agent/Office

Northwest Registered Agent LLC
212 N. 2nd Street, STE 100
Richmond, KY 40475

I, **JEREMIAH NELSON**, consent to sign for **Northwest Registered Agent LLC** who serves as the **Registered Agent** on behalf of this Entity.
on Thursday, February 23, 2023

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