Michael G. Adams Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Amended Certificate of Authority

Pursuant to the provisions of KRS chapters 14A and 271B, 273, 274, 275, 362, or 386, the undersigned hereby applies for an amended certificate of authority on behalf of the entity named below, and for that purpose, submits the following statements:

- 1. The business entity is a profit corporation (KRS 271B).
- 2. The name of the business entity is:

Safety Management Services Company

- 3. It is an entity organized and existing under the laws of the state of lowa.
- The entity received authority to transact business in Kentucky on 7/31/2013. 4.
- This application will be effective upon filing. 5.
- 5. The entity has changed its

Form of organization to a limited liability company Domicile name to SAFETY MANAGEMENT SERVICES COMPANY, LLC Management type to Manager managed

As the authorized representative, I, Susan Murphy, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

Title: Authorized Representative 3/27/2024

P102

Michael G. Adams Received and Filed 3/27/2024 10:37:35 AM Fee receipt: \$40.00

0863490

FCA