Commonwealth of Kentucky Michael G. Adams, Secretary of St.

1155392 1155392 Michael G. /....... KY Secretary of State Received and Filed

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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

RCA

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: Thrive Operations LLC
- 3. The name of the entity to be used in Kentucky is (if applicable): Thrive Operations LLC
- 4. It is an entity organized and existing under the laws of the state of Delaware.
- 5. The date of organization is 11/21/2016 and the period of duration is perpetual

Principal Office

25 Forbes Blvd Ste 3 Foxboro, MA 02035

Registered Agent Name/Address

Jennifer Donegan 668 Sipple Dr Covington, KY 41015

- 6. As the Authorized Representative, I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Jennifer Donegan on 10/27/2022
- 7. As the Registered Agent, I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Jennifer Donegan on 10/27/2022