

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

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

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KY	Michael G. Adams	L902
Rec	Kentucky Secretary of State	
6	Received and Filed:	
Fe	6/5/2023 2:11 PM	
	Fee Receipt: \$90.00	

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: **TOP TIER ROOFING SOLUTIONS 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 **North Carolina**.
5. The date of organization is **9/30/2022** and the period of duration is **perpetual**.
6. This entity is managed by Members

**7. Principal Office**

1530 Center Park Drive  
Charlotte, NC 28217

**8. Registered Agent/Office**

Registered Agents Inc  
212 N. 2nd St. STE 100  
Richmond, KY 40475

I, **David Roberts**, consent to sign for **Registered Agents Inc** who serves as the **Registered Agent** on behalf of this Entity.  
on Friday, June 2, 2023

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