

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

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Michael G. Adams Kentucky Secretary of State Received and Filed: 2/27/2024 1:31 PM Fee Receipt: \$90.00

P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov		e of Authority siness Entity)	2.22		
Pursuant to the provisions of KRS 14A and, for that purpose, submits the follow		lies for authority to transact b	ousiness in Kentucky	on beha <b>l</b> f of the entity na	amed be <b>l</b> o
business trust Ilimited linited partnership Itd coope		it corporation iability company erative association ional service corporation	professional limited liability company statutory trust public benefit corporation other		
2. The name of the entity is Japan St (The	eel Works America, Inc. name must be identical to the na	me on record with the Secr	etary of State.)		·
4. The state or country under whose law 5. The date of organization is <u>08/15/1</u>	w the entity is organized is <u>State of</u> 978	r provide if "real name" is under the Yorkand the period of duratio	n is	on is considered perpe	, 
6. The mailing address of the entity's principal office is 1251 Avenue of the Americas, Suite 2390		New York	NY	10020	
Street Address		City	State	Zip Code	
7. The street address of the entity's registered office in Kentucky is 421 West Main Street		Frankfort	KY	40601	
Street Address (No P.O. Box Numbers) and the name of the registered agent at that office is Corporation Servi		City	Sta	ate Zip Co	ode
					·
8. The names and business addresses	of the entity's representatives (sec	retary, officers and directors,	managers, trustees o	r general partners):	
Yoshitaka Sato (President)	1251 AoA, Suite 2390	New York	<u>NY</u>	10020	
Name	Street or P.O. Box	City	State	Zip Code	
Maki Murakami (CFO/CHRO) Name	1251 AoA, Suite 2390 Street or P.O. Box	New York City	NY State	10020 Zip Code	
Yoshiharu Kato (President)	1251 AoA, Suite 2390	New York	NY	10020	
Name	Street or P.O. Box	City	State	Zip Code	
9. If a professional service corporation, and treasurer are licensed in one or mo statement of purposes of the corporatio	re states or territories of the United				

Yoshiharu Kato, Secretary

Signature of Authorized Representative

Printed Name & Title

Date

I, Corporation Service Company

, consent to serve as the registered agent on behalf of the business entity.

Type/Print Name of Registered Agent

10. I certify that, as of the date of filing this application, the above-named entity validly exists under the laws of the jurisdiction of its formation.

11. If a limited partnership, it elects to be a limited liability limited partnership. Check the box if applicable:

12. If a limited liability company, check box if manager-managed:

13. This application will be effective upon filing.

Will Mail Will Kaitlyn RoseCorporation Service CompanyAsst. Secretary02/27/2024Signature of Registered AgentPrinted NameTitleDate