				1425893	.06 mmoore ADD	
	COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE			Michael G. Adams Kentucky Secretary of State Received and Filed: 1/29/2025 3:59 PM		
Division of Business Filings	Ce	ertificate of Authori	ty	Fee Receipt: \$	90.00	
P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	(Fc	oreign Business Entity)				
Pursuant to the provisions of KRS 14A and, for that purpose, submits the follo		hereby applies for authority to	transact business in Ke	entucky on beha l f of	the entity named below	
1. The entity is a: profit corpo	ation nonprofit corporation		profes	professional limited liability company		
business tru	ust X	limited liability company	statute	statutory trust		
limited part	nership	Itd cooperative association	public	benefit corporation		
non-profit II		professional service corpor	ation dther			
2. The name of the entity is	DFMS, LLC					
		al to the name on record with	n the Secretary of Stat	e.)		
 The name of the entity to be used in The state or country under whose la 		(Only provide if "real r	ame" is unavailable fo	or use; otherwise, I	eave blank.)	
5. The date of organization is <u>1</u>		and the period	of duration is	Perpetual	·	
			(If left blank	, duration is consi	dered perpetual.)	
6. The mailing address of the entity's		Additior	т Т	'X 7	5001	
5080 Spectrum Drive Suite	2000L		State		Code	
5080 Spectrum Drive, Suite Street Address		City	Jiale	- <u> </u>		
Street Address	gistered office in Kentuck		State	<u>-</u> Σιμ		
Street Address 7. The street address of the entity's re 306 West Main Street, Suite	512	ky is Frankf	ort <u>ky</u>		40601	
Street Address 7. The street address of the entity's re 306 West Main Street, Suite Street Address (No P.O. Box Number)	512 ers)	ky is Frankford C		State	40601 Zip Code	
Street Address 7. The street address of the entity's re 306 West Main Street, Suite	512 ers)	ky is Frankford C	ort <u>ky</u>			
Street Address 7. The street address of the entity's re 306 West Main Street, Suite Street Address (No P.O. Box Number)	rs) at that office is <u>CT (</u>	ry is Frankford Corporation System	ort <u>KY</u>	State	Zip Code	
Street Address 7. The street address of the entity's re 306 West Main Street, Suite Street Address (No P.O. Box Numbe and the name of the registered agent a 8. The names and business addressed	512 (rs) (at that office is <u>CT</u>) (at the entity's represent	cy is Frankford Corporation System	ort KY ity directors, managers, tru	State	Zip Code	
Street Address 7. The street address of the entity's re 306 West Main Street, Suite Street Address (No P.O. Box Numbe and the name of the registered agent a	512 (rs) (at that office is <u>CT</u>) (at the entity's represent	ry is Frankford Corporation System	ort KY ity directors, managers, tru	State ustees or general pa	Zip Code	
Street Address 7. The street address of the entity's re <u>306 West Main Street, Suite</u> Street Address (No P.O. Box Number and the name of the registered agent a 8. The names and business addresses <u>Met-Pro Technologies LLC</u>	512 (rs) (that office is <u>CT(</u>) s of the entity's represent 14651 N. Dallas	tatives (secretary, officers and Parkway, Suite 500, D	ort <u>Ky</u> ity directors, managers, tru allas, TX 75254	State ustees or general pa	Zip Code	
Street Address 7. The street address of the entity's re <u>306 West Main Street, Suite</u> Street Address (No P.O. Box Number and the name of the registered agent a 8. The names and business addresses <u>Met-Pro Technologies LLC</u> Name	s of the entity's represent 14 that office is <u>CT(</u> 14651 N. Dallas Street or P.O. Box	ty is <u>Frankfor</u> <u>Corporation System</u> tatives (secretary, officers and <u>Parkway, Suite 500, D</u> <u>City</u>	ort кү ity directors, managers, tru allas, TX 75254 State	State ustees or general pa a Zip	Zip Code artners): Code	
Street Address 7. The street address of the entity's re <u>306 West Main Street, Suite</u> Street Address (No P.O. Box Numbe and the name of the registered agent a 8. The names and business addresse: <u>Met-Pro Technologies LLC</u> Name Name	s 512 st that office is <u>CT(</u> s of the entity's represent <u>14651 N. Dallas</u> Street or P.O. Box Street or P.O. Box Street or P.O. Box all the individual sharehous states or territories of bon.	cy is Frankford Corporation System tatives (secretary, officers and Parkway, Suite 500, D City City City Olders, not less than one half (the United States or District of	brtKY	State Ustees or general pa De Zip	Zip Code artners): Code Code Code ther than the secretary described in the	
Street Address 7. The street address of the entity's re 306 West Main Street, Suite Street Address (No P.O. Box Numbe and the name of the registered agent a 8. The names and business addresses Met-Pro Technologies LLC Name 9. If a professional service corporation, and treasurer are licensed in one or mastatement of purposes of the corporation	that office is <u>CT(</u> s of the entity's represent <u>14651 N. Dallas</u> Street or P.O. Box Street or P.O. Box Street or P.O. Box all the individual sharehous this application, the abov	cy is Frankfi Corporation System tatives (secretary, officers and Parkway, Suite 500, D City City City city olders, not less than one half (the United States or District of the United States or District of	Drt KY ity directors, managers, tru allas, TX 75254 State State 1/2) of the directors, and f Columbia to render a p under the laws of the jur	State Ustees or general pa De Zip	Zip Code artners): Code Code Code ther than the secretary described in the	
Street Address 7. The street address of the entity's re 306 West Main Street, Suite Street Address (No P.O. Box Numbe and the name of the registered agent a 8. The names and business addresses Met-Pro Technologies LLC Name 9. If a professional service corporation, and treasurer are licensed in one or mestatement of purposes of the corporation 10. I certify that, as of the date of filing	that office is <u>CT(</u> s of the entity's represent <u>14651 N. Dallas</u> Street or P.O. Box Street or P.O. Box Street or P.O. Box all the individual sharehore states or territories of on.	cy is Frankfi Corporation System tatives (secretary, officers and Parkway, Suite 500, D City City City olders, not less than one half (the United States or District of the United States or District of the United States or District of the United States or District of	Drt KY ity directors, managers, tru allas, TX 75254 State State 1/2) of the directors, and f Columbia to render a p under the laws of the jur	State Ustees or general pa De Zip	Zip Code artners): Code Code Code ther than the secretary described in the	
Street Address 7. The street address of the entity's re 306 West Main Street, Suite Street Address (No P.O. Box Number and the name of the registered agent at 8. The names and business addresses Met-Pro Technologies LLC Name 9. If a professional service corporation, and treasurer are licensed in one or mostatement of purposes of the corporation 10. I certify that, as of the date of filing 11. If a limited partnership, it elects to be	that office is <u>CT(</u> s of the entity's represent <u>14651 N. Dallas</u> Street or P.O. Box Street or P.O. Box Street or P.O. Box all the individual sharehous this application, the about this application, the about this application, the about the individual sharehous states or territories of this application, the about the individual sharehous states or territories of the states or territories of the states or territories of the states of the states of the states of the states of the states of	cy is <u>Frankf</u> <u>Corporation System</u> tatives (secretary, officers and <u>Parkway, Suite 500, D</u> <u>City</u> <u>City</u> olders, not less than one half (the United States or District of re-named entity validly exists of d partnership. Check the box	Drt KY ity directors, managers, tru allas, TX 75254 State State 1/2) of the directors, and f Columbia to render a p under the laws of the jur if applicable:	State Ustees or general pa De Zip	Zip Code artners): Code Code Code ther than the secretary described in the	
Street Address 7. The street address of the entity's re 306 West Main Street, Suite Street Address (No P.O. Box Number and the name of the registered agent at 8. The names and business addresses Met-Pro Technologies LLC Name 9. If a professional service corporation, and treasurer are licensed in one or most statement of purposes of the corporation 10. I certify that, as of the date of filing 11. If a limited partnership, it elects to be 12. If a limited liability company, cheet	that office is <u>CT(</u> s of the entity's represent <u>14651 N. Dallas</u> Street or P.O. Box Street or P.O. Box Street or P.O. Box all the individual sharehous this application, the about this application, the about this application, the about the individual sharehous states or territories of this application, the about the individual sharehous states or territories of the states or territories of the states or territories of the states of the states of the states of the states of the states of	Ary is Frankfi C Corporation System tatives (secretary, officers and Parkway, Suite 500, D City City Olders, not less than one half (The United States or District of the United States or Distr	Drt KY ity directors, managers, tru allas, TX 75254 State State 1/2) of the directors, and f Columbia to render a p under the laws of the jur if applicable: Chief Financial &	State ustees or general pa 2 2 2 3 3 4 all of the officers of professional service isdiction of its forma	Zip Code artners): Code Code Code ther than the secretary described in the	
Street Address 7. The street address of the entity's re 306 West Main Street, Suite Street Address (No P.O. Box Number and the name of the registered agent at 8. The names and business addresses Met-Pro Technologies LLC Name 9. If a professional service corporation, and treasurer are licensed in one or most statement of purposes of the corporation 10. I certify that, as of the date of filing 11. If a limited partnership, it elects to be 12. If a limited liability company, cheet	that office is <u>CT(</u> s of the entity's represent <u>14651 N. Dallas</u> Street or P.O. Box Street or P.O. Box Street or P.O. Box all the individual sharehous this application, the about this application, the about this application, the about the individual sharehous states or territories of this application, the about the individual sharehous states or territories of the states or territories of the states or territories of the states of the states of the states of the states of the states of	cy is <u>Frankf</u> <u>Corporation System</u> tatives (secretary, officers and <u>Parkway, Suite 500, D</u> <u>City</u> <u>City</u> olders, not less than one half (the United States or District of re-named entity validly exists of d partnership. Check the box	Drt KY ity directors, managers, tru allas, TX 75254 State State 1/2) of the directors, and f Columbia to render a p under the laws of the jur if applicable: Chief Financial & Sole Member	State Ustees or general pa De Zip	Zip Code artners): Code Code Code Other than the secretary described in the ation.	
Street Address 7. The street address of the entity's re <u>306 West Main Street, Suite</u> Street Address (No P.O. Box Numbe and the name of the registered agent a 8. The names and business addresses <u>Met-Pro Technologies LLC</u> Name Name 9. If a professional service corporation, and treasurer are licensed in one or mestatement of purposes of the corporation 10. I certify that, as of the date of filing 11. If a limited partnership, it elects to b 12. If a limited liability company, chece 13. This application will be effective up	that office is <u>CT(</u> s of the entity's represent <u>14651 N. Dallas</u> Street or P.O. Box Street or P.O. Box Street or P.O. Box all the individual sharehous street or P.O. Box this application, the abov be a limited liability limited box if manager-mana on filing.	y is <u>Frankf</u> Corporation System tatives (secretary, officers and <u>Parkway, Suite 500, D</u> City City City olders, not less than one half (the United States or District of re-named entity validly exists of d partnership. Check the box aged: □ Peter Johansson, C Strategy Officer of Printed Nam	Drt KY ity directors, managers, tru allas, TX 75254 State State 1/2) of the directors, and f Columbia to render a p under the laws of the jur if applicable: Chief Financial & Sole Member	State Ustees or general particular of the officers of general particular of the officers of th	Zip Code artners): Code Code Code Code bther than the secretary described in the tion. 29, 2025	
Street Address 7. The street address of the entity's re <u>306 West Main Street, Suite</u> Street Address (No P.O. Box Numbe and the name of the registered agent a 8. The names and business addresses <u>Met-Pro Technologies LLC</u> Name Name 9. If a professional service corporation, and treasurer are licensed in one or me statement of purposes of the corporate 10. I certify that, as of the date of filing 11. If a limited partnership, it elects to b 12. If a limited liability company, chece 13. This application will be effective up Signature of Authorized Representative	that office is <u>CT(</u> s of the entity's represent <u>14651 N. Dallas</u> Street or P.O. Box Street or P.O. Box Street or P.O. Box Street or P.O. Box all the individual shareho ore states or territories of on. this application, the abov be a limited liability limited on filing.	y is <u>Frankf</u> Corporation System tatives (secretary, officers and <u>Parkway, Suite 500, D</u> City City City olders, not less than one half (the United States or District of re-named entity validly exists of d partnership. Check the box aged: □ Peter Johansson, C Strategy Officer of Printed Nam	Drt KY ity directors, managers, tru allas, TX 75254 State State 1/2) of the directors, and f Columbia to render a p under the laws of the jur if applicable: Chief Financial & Sole Member a Title	State Ustees or general paralelelelelelelelelelelelelelelelelelel	Zip Code artners): Code Code Code Code bther than the secretary described in the tion. 29, 2025	

SO-(internet

(2/23)