

1200294.06 Michael G. Adams

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Kentucky Secretary of State Received and Filed:

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

4/1/2022 11:57 AM Fee Receipt: \$90.00 **Division of Business Filings** Certificate of Authority P.O. Box 718 (Foreign Business Entity) Frankfort, KY 40602 (502) 564-3490 www.sos.kv.gov Pursuant to the provisions of KRS 14A - 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: professional limited liability company 1. The entity is a: profit corporation nonprofit corporation business trust limited liability company statutory trust Itd cooperative association limited partnership other non-profit IIc professional service corporation 2. The name of the entity is Fidelitone Last Mile Operating Company, LLC (The name must be identical to the name on record with the Secretary of State.) 3. The name of the entity to be used in Kentucky is (if applicable): (Only provide if "real name" is unavailable for use; otherwise, leave blank.) Delaware 4. The state or country under whose law the entity is organized is_ and the period of duration is Perpetual 5. The date of organization is 12/8/2021 (If left blank, duration is considered perpetual.) 6. The mailing address of the entity's principal office is 1260 Karl Court 60084 Wauconda IL Street Address State Zip Code City 7. The street address of the entity's registered office in Kentucky is 421 W. Main St. Frankfort 40601 Street Address (No P.O. Box Numbers) State City Zip Code and the name of the registered agent at that office is Corporation Service Company 8. The names and business addresses of the entity's representatives (secretary, officers and directors, managers, trustees or general partners): Robert J. Johnson 1260 Karl Court Wauconda IL 60084 Street or P.O. Box Zip Code Name City State Ross T. Hudson 1260 Karl Court Wauconda 60084 IL Name Street or P.O. Box Citv State Zip Code Name Street or P.O. Box City State Zip Code 9. If a professional service corporation, all the individual shareholders, not less than one half (1/2) of the directors, and all of the officers other than the secretary and treasurer are licensed in one or more states or territories of the United States or District of Columbia to render a professional service described in the statement of purposes of the corporation. 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. Mar 17, 2022 (Mar 17, 2022 12:09 CDT Robert J. Johnson, Manager Printed Name & Title Signature of Authorized Representative Date Corporation Service Company consent to serve as the registered agent on behalf of the business entity. ed Agent 03/31/2022 Charlene Sati Asst. VP

Printed Name

Title

Date

Signature or negratered Agent

KY FLMOC Certificate of Authorization_Foreign Business Entity

Final Audit Report

2022-03-17

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"KY FLMOC Certificate of Authorization_Foreign Business Entity " History

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