

COMMONWEALTH OF KENTUCKY MICHAEL ADAMS, SECRETARY OF STATE

1203996.06

dwilliams ADD

Michael G. Adams Kentucky Secretary of State Received and Filed: 4/21/2022 10:31 AM Fee Receipt: \$90.00

Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Certificate of Authority (Foreign Business Entity)
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Pursuant to the provisions of KRS 14A a on behalf of the entity named below and	and KRS 271B, 273, 274,275, 30, for that purpose, submits the fo	62 and 386 the undersigned he ollowing statements:	reby applies for autho	rity to transact business in Kentuck
business trus	st (KRS 386). Ilmite ership (KRS 362). Itd co	orofit corporation (KRS 273) and liability company (KRS 275) appropriative assn. (KRS) appropriative assn. (KRS)		
2. The name of the entity is Prime Ele		,		
3. The name of the entity to be used in I		on record with the Secretary of St	ate.)	
3. The hame of the entity to be used in	(O)	nly provide if "real name" is unav	ailable for use; otherwi	se, leave blank.)
4. The state or country under whose law				
5. The date of organization is 12/221986 and the period of duration is perpetual (If left blank, duration is considered perpetual.)				
6. The mailing address of the entity's pri	incipal office is		(If left blank, duration	s considered perpetual.)
3460 161st Avenue SE		Bellevue	WA	98008
Street Address		City	State	Zip Code
7. The street address of the entity's regi	stered office in Kentucky is			
421 West Main Street Street Address (No P.O. Box Numbers)		Frankfort	KY State	40601
· · · · · · · · · · · · · · · · · · ·		City	State	Zip Code
and the name of the registered agent at				•
8. The names and business addresses	of the entity's representatives (se	ecretary, officers and directors,	managers, trustees o	r general partners):
Prime Group LLC	3460 161st Avenue SE	Bellevue	WA	98008
	Street or P.O. Box	City	State	Zip Code
Manage	C44 D.O. D	0.11		
Name	Street or P.O. Box	City	State	Zip Code
	Street or P.O. Box	City	State	Zip Code
	Street or P.O. Box vidual shareholders, not less than one istrict of Columbia to render a profession is application, the above-named a limited liability limited partners box if manager-managed: n filing, unless a delayed effective	City half (1/2) of the directors, and all of the onal service described in the statement of entity validly exists under the light. Check the box if application and the other characteristics are considered.	State officers other than the sec of purposes of the corpora aws of the jurisdiction ble:	Zip Code retary and treasurer are licensed in one or tion.
Name 9. If a professional service corporation, all the indimore states or territories of the United States or Di 10. I certify that, as of the date of filing th 11. If a limited partnership, it elects to be 12. If a limited liability company, check 13. This application will be effective upon	Street or P.O. Box vidual shareholders, not less than one I istrict of Columbia to render a profession is application, the above-named a limited liability limited partners box if manager-managed: filing, unless a delayed effective date cannot be prior to the date	City half (1/2) of the directors, and all of the onal service described in the statement of entity validly exists under the light. Check the box if application and the other characteristics are considered.	State officers other than the sec of purposes of the corpora aws of the jurisdiction ble:	Zip Code retary and treasurer are licensed in one or tion.
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