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AMD
Michael G. Adams
Kentucky Secretary of State
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COMMONWEALTH OF KENTUCKY
MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Amended Certificate of Authority (Foreign Business Entity)	FCA
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Pursuant to the provisions of KRS Chapter KRS 14A.9 - 040 the undersigned hereby applies for an amended certificate of authority on behalf of the entity named below and, for that purpose, submits the following statements:

- The business entity is:

<input checked="" type="checkbox"/> profit corporation <input type="checkbox"/> professional service corporation <input type="checkbox"/> limited liability company <input type="checkbox"/> professional limited liability company <input type="checkbox"/> limited cooperative association <input type="checkbox"/> other	<input type="checkbox"/> nonprofit corporation. <input type="checkbox"/> business trust <input type="checkbox"/> limited partnership <input type="checkbox"/> statutory trust <input type="checkbox"/> non-profit LLC
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- The name of the company is: Wells Dairy Inc.
 (The name must be identical to the name on record with the Secretary of State.)
- It is an entity organized and existing under the laws of the state or country of IA.
- The entity received authority to transact business in Kentucky on 12/3/1993.
- The entity has changed its (check all that apply)
 - Domicile name to Wells Enterprises, Inc
 - Name to be used in Kentucky to Wells Enterprises of Iowa, Inc.
 - Jurisdiction of organization to _____
 - Period of duration _____
 - Form of organization _____
 - Management type: Member managed Manager managed
- This application will be effective upon filing.

I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct.

	<u>Jeremy Pinkerman</u>	<u>EXP/CFO</u>	<u>9/13/2023</u>
Signature of Authorized Representative	Printed Name	Title	Date