

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
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Michael G. Adams
Secretary of State
P. O. Box 718
Frankfort, KY 40602-0718
(502) 564-3490
<http://www.sos.ky.gov>

Certificate of Authority

FBE

Pursuant to the provisions of KRS 14A.9 - 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.

1. The business entity is a **profit corporation**.
2. The name of the entity is: **OWNERSHEILD, INC**
3. The name of the entity to be used in Kentucky is (if applicable): **N/A**
4. The state or country whose law the entity is organized is **Texas**.
5. The date of organization is **10/30/2009** and the period of duration is **perpetual**.

7. Principal Office

1900 FIRMAN DR
SUITE 700
Richardson, TX 75081

8. Required Representatives

Director	Richard S Kahlbaugh	10751 DEERWOOD PARK BLVD ste. 200	JACKSONVILLE	FL	32256
Secretary	John Glenn Short	10751 DEERWOOD PARK BLVD STE. 200	JACKSONVILLE	FL	32256
Officer	Peter G Masi	1900 FIRMAN DR STE 700	Richardson	TX	75081
Officer	Rushit Mohda	1900 FIRMAN DR STE 200	Richardson	TX	75081

9. Registered Agent/Office

Corporate Creations Network Inc.
101 North Seventh Street
Louisville, KY 40202

I, **Diana Serra**, consent to sign for **Corporate Creations Network Inc.** who serves as the **Registered Agent** on behalf of this Entity.
on Thursday, October 19, 2023

As the Authorized Representative, I, **Peter Masi**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **President**