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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 Foreign Business Entity

Pursuant to the provisions of KRS Chapter 14A and KRS Chapter 273 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 entity is a **nonprofit** corporation.
- 2. The name of the entity is **Continuing Legal Education in Colorado**.
- 3. The name of the entity to be used in Kentucky is **Continuing Legal Education in Colorado Inc**.
- 4. The state or country under whose law the entity is organized is **Colorado**.
- 5. The date of organization is 1/3/1972.
- 6. The mailing address of the entity's principal office is **1290 N Broadway Ste 1700, Denver, CO 80203**.
- 7. The street address of the entity's registered office in Kentucky is **110 W Vine St, Lexington, KY 40504** and the name of the registered agent in that office is **ADP Lexington**.
- 8. The names and business addresses of the entity's representatives:

Lori L Krupske	1290 N Broadway Ste 1700, Denver, CO 80203
Lori Krupske	1290 N Broadway Ste 1700, Denver, CO 80203

- 9. I certify that, as of the date of filing of this application, the above-named entity validly exists under the laws of the jurisdiction of its formation.
- 10. This application will be effective on filing.

Signature of Authorized Representative: Lori Krupske

I, **ADP Lexington**, consent to serve as the Registered Agent on behalf of the business entity.

Signature of Registered Agent or individual signing on behalf of the company serving as Registered Agent:

Lori Krupske