



MONTANA SECRETARY OF STATE

August 2, 2022

Kelly Teelin
kateelin@michaelbest.com

CERTIFICATION LETTER

I, CHRISTI JACOBSEN, Secretary of State for the State of Montana, do hereby certify that

KENCO SECURITY AND TECHNOLOGY.

filed its **Renew an Assumed Business Name** in this office and has fulfilled the applicable requirements set forth in law. By virtue of the authority vested in this office, I hereby issue this certificate evidencing the filing is effective on the date shown below.

Certified File Number: A208079 - 15312577

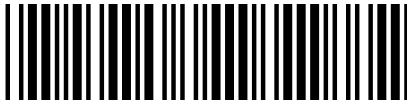
Effective Date: August 2, 2022

Expiration Date: October 22, 2027

Thank you for being a valued member of the Montana business community. I wish you continued success in your endeavors.

A handwritten signature in cursive script that reads "Christi Jacobsen".

Christi Jacobsen
Montana Secretary of State



15312577



STATE OF MONTANA
SECRETARY OF STATE
RENEW AN ASSUMED BUSINESS NAME

For Office Use Only
STATE OF MONTANA
-FILED-
SECRETARY OF STATE
File Number: 15312577
Date Filed: 8/2/2022 1:56:52 PM

FILING FEE: \$20.00

Fees and Processing Options	Standard Processing - \$20.00 - Up to 7-10 business days processing	
Entity Details		
Assumed Business Name:	KENCO SECURITY AND TECHNOLOGY.	
Montana Filing Number:	A208079	
Business Description	DESIGN,SELL,INSTALL,SERVICE*	
Applicant		
Applicant Type	Corporation	
Registered Business Entity		
Search for your business entity	FIRE PROTECTION SERVICE CORPORATION Foreign Profit Corporation File Number F063797	
Applicant Mailing Address		
Address	PO BOX 12487 OGDEN, UT 84412-2487	
Declarations		
<input checked="" type="checkbox"/>	I understand that the information I enter into the online system is public information and will appear online and on copy requests exactly as I key it into the system.	
<input checked="" type="checkbox"/>	I have been authorized by the business entity to file this document online.	
<input checked="" type="checkbox"/>	I, HEREBY SWEAR AND/OR AFFIRM, under penalty of law, including criminal prosecution, that the facts contained in this document are true. I certify that I am signing this document as the person(s) whose signature is required, or as an agent of the person(s) whose signature is required, who has authorized me to place his/her signature on this document.	
Signature		
<i>Power of Attorney</i>	<i>Fire Protection Service Corporation</i>	<i>Kelly Teelin</i>
Signer's Capacity	On behalf of	Sign Here
<i>08/02/2022</i>		
Date		
Position	Applicant	
Daytime Contact		
Phone Number	(608) 257-3501	
Email	kateelin@michaelbest.com	

B07333-1053 08/02/2022 1:56 PM Received by MT Secretary of State Christi Jacobsen