

State of Indiana  
Office of the Secretary of State

Certified Copies

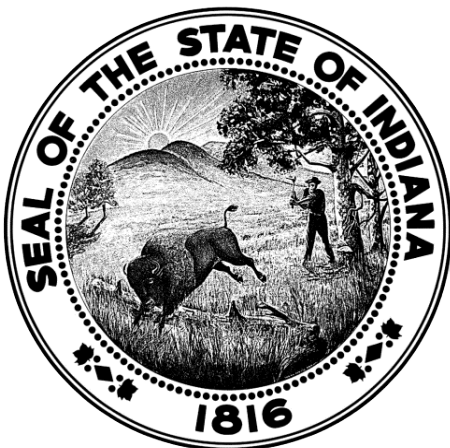
To Whom These Presents Come, Greeting:

I, DIEGO MORALES, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that this is a true and complete copy of this 2 page document consisting of the following records filed in this office:

Certification Date: April 15, 2024  
Business Name: THOMAS P. MILLER & ASSOCIATES, LLC  
Business ID: 2002011500043

Transaction	Date Filed	No. of pages
Business Entity Report	01/04/2024	2
Total No. of pages		2



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, April 15, 2024

*Diego Morales*

DIEGO MORALES  
SECRETARY OF STATE

2002011500043 / 16604258

All certificates should be validated here: <https://bsd.sos.in.gov/ValidateCertificate>

Expires on May 15, 2024.

**BUSINESS ENTITY REPORT**

**NAME AND PRINCIPAL OFFICE ADDRESS**

**BUSINESS ID** 2002011500043  
**BUSINESS TYPE** Domestic Limited Liability Company  
**BUSINESS NAME** THOMAS P. MILLER & ASSOCIATES, LLC  
**ENTITY CREATION DATE** 01/14/2002  
**JURISDICTION OF FORMATION** Indiana  
**PRINCIPAL OFFICE ADDRESS** PO Box 881011, Indianapolis, IN, 46208, USA

**YEARS FILED**

**YEARS** 2024/2025

**EFFECTIVE DATE**

**EFFECTIVE DATE** 01/04/2024  
**EFFECTIVE TIME** 11:33 AM

**REGISTERED OFFICE AND ADDRESS**

**REGISTERED AGENT TYPE** Individual  
**NAME** THOMAS P MILLER  
**ADDRESS** 3548 W. 500 NORTH, MCCORDSVILLE, IN, 46055, USA

**GOVERNING PERSON INFORMATION**

**TITLE** CEO  
**NAME** Thomas Miller  
**ADDRESS** 3548 W 500 N, McCordsville, IN, 46055, USA

**TITLE** Manager  
**NAME** Dustin Miller  
**ADDRESS** PO Box 881011, Indianapolis, IN, 46208, USA

**APPROVED AND FILED**  
**DIEGO MORALES**  
**INDIANA SECRETARY OF STATE**  
**01/04/2024 11:33 AM**

**SIGNATURE**

IN WITNESS WHEREOF, THE UNDERSIGNED HEREBY VERIFIES, SUBJECT TO THE PENALTIES OF PERJURY, THAT THE STATEMENTS CONTAINED HEREIN ARE TRUE, THIS DAY **January 4, 2024**.

THE UNDERSIGNED ACKNOWLEDGES THAT A PERSON COMMITS A CLASS A MISDEMEANOR BY SIGNING A DOCUMENT THAT THE PERSON KNOWS IS FALSE IN A MATERIAL RESPECT WITH THE INTENT THAT THE DOCUMENT BE DELIVERED TO THE SECRETARY OF STATE FOR FILING.

**SIGNATURE**

Dustin Miller

**TITLE**

Manager

Business ID : 2002011500043

Filing No. : 10157269