

Commonwealth of Kentucky  
Michael G. Adams, Secretary of State

L902

1413400.06  
Michael G. Adams  
Secretary of State  
Received and Filed  
12/5/2024 12:00:00 AM  
Fee receipt: \$90

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 entity is a **limited liability company**.

2. The name of the entity is

**Previon**

3. The name of the entity to be used in Kentucky is

**PREVION LLC**

4. The state or country under whose law the entity is organized is **California**.

5. The date of organization is **6/3/2019** and the period of duration is **perpetual**.

6. The mailing address of the entity's principal office is

**22895 Eastpark Dr, Yorba Linda, CA 92887**

7. The name of the initial registered agent is

**Previon**

and the street address of the entity's initial registered office in Kentucky is

**7503 Glen Arbor Rd, Louisville, KY 40222**

8. The names and business addresses of the entity's representatives:

**Member** Joel Luce 3 Barringer Ct, Newport Beach, CA 92660

9. This entity is managed by **Members**.

10. This filing will be effective on **Thursday, December 5, 2024**.

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

Signature of individual signing on behalf of **VP Executive Administration/HR: Jenny Brown**

I, **Previon, Jenny Brown**, consent to sign for **Previon** who serves as the Registered Agent on behalf of this entity on

Thursday, December 5, 2024.

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