

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
Secretary of State
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Michael G. Adams
Secretary of State
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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

UNIVERSAL RETIREMENT LLC

3. The state or country under whose law the entity is organized is **Nevada**.

4. The date of organization is **11/18/2013** and the period of duration is **perpetual**.

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

3127 East Warm Springs Rd, Suite 100, las vegas, NV 89120

6. The name of the initial registered agent is

Grant Vickers

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

2205 KY 39 S, Crab Orchard, KY 40419

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

Member	Todd Howell	3127 East Warm Springs Rd, Suite 100, las vegas, NV 89120
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8. This entity is managed by **Members**.

9. This filing will be effective on **Friday, November 15, 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 **Operations Manager:**
Scott Wheatfill

I, **Grant Vickers**, consent to serve as the Registered Agent on behalf of this entity on Friday, November 15, 2024.