

COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

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Michael G. Adams Kentucky Secretary of State

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Division of Business Filings **Articles of Organization PLC** P.O. Box 718 Frankfort, KY 40602 Professional Limited Liability Company (502) 564-3490 www.sos.ky.gov Pursuant to KRS 14A and KRS 275, the undersigned applies to qualify and for that purpose submits the following statements: Article I: The name of the professional limited liability company is: For The Health Of It. PLLC Article II: The street address of the professional limited liability company's initial registered office in Kentucky is: 9900 Corprt Campus Dr Ste 3000 Louisville KY Zip Code Street Address Only (No Post Office Box Numbers) City State and the name of the initial registered agent at that office is _United States Corporation Agents, Inc. Article III: The mailing address of the professional limited liability company's initial principal office is: 41501 Pikeville KY 520 Town Mountain Rd Street Address or Post Office Box Number City State Zip Code Article IV: The professional limited liability company is to be managed by (must check one): A. a manager(s). B. its member(s). Article V: The profession to be practiced through the professional limited liability company: Nutrition Consultancy services provided by a Licensed Dietitian Nutritionist. Article VI: This application will be effective upon filing. If checked, this business is veteran-owned as defined by KRS 14A.2-070(45) and 14A.2-165 (see Article VII: instructions). I/We declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Kavli Hope Heitritter 4/10/2023 **Printed Name** Date Signature of Organize Date Signature of Organizer **Printed Name** Date Printed Name Signature of Organizer United States Corporation Agents, Inc. consent to serve as the registered agent on behalf of the limited liability company. Print Name of Registered Agent

Printed Name

Cheyenne Moseley, Assistant Secretary, United States Corporation Agents, Inc.

Signature of Registered Agent



Public Protection Cabinet Department of Professional Licensing

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3/23/2023 3:14:37 PM

Board Name : Kentucky Board of Licensure and Certification for Dietitians and Nutritionists License Type : Dietitian and Nutritionist Dual						
Kayli Hope Heitritter		269530	No	Active	3/31/2021 12:00:00 AM	12/31/2023 12:00:00 AM





Commission on Dietetic Registration

CDR certifies that

Kayli Hope Heitritter

has successfully completed requirements for dietetic registration.

Registration

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Academyof Nutrition

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PDF Copy

Signature

Registration I.D. Number

Registered Dietitian (RD) Registered Dietitian Nutritionist (RDN)

86110079

Registration Payment Period 9/01/22 - 8/31/23

Christina Rollins, MBA, MS, RDN, LDN, FAND, CNSC

Chair, Commission on Dietetic Registration