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**

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

## **BATHROOM CHICKEN LLC**

- 4. The state or country under whose law the entity is organized is Indiana.
- 5. The date of organization is 1/2/2025 and the period of duration is perpetual.
- 6. The mailing address of the entity's principal office is

## 415 crestview ct, Jeffersonville, IN 47130

7. The name of the initial registered agent is

### Jeff Harman

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

### 2068 Eastern Parkway #1, Louisville, KY 40204

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

Manager	David Hester	415 crestview ct, jeffersonville, IN 47130
Organizer	David Hester	415 crestview ct, jeffersonville, IN 47130

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

10. This filing will be effective on Tuesday, April 1, 2025.

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 **Manager: David Hester** 

l, **Jeff Harman**, consent to serve as the Registered Agent on behalf of this entity on Tuesday, April 1, 2025. Page 1 of 1 L902

1443403.06 Michael G. Adams Secretary of State Received and Filed 4/1/2025 12:00:00 AM Fee receipt: \$90

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