

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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

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Michael G. Adams
Secretary of State
Received and Filed
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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

DARK HORSE VEGETATION MANAGEMENT, LLC

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

4. The date of organization is **6/17/2024** and the period of duration is **perpetual**.

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

8447 Morgan Co Hwy, Sunbright, TN 37872

6. The name of the initial registered agent is

Capital Corporate Services, Inc.

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

828 Lane Allen Road Suite 219, Lexington, KY 40504

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

Member James Diaz-Barriga 8447 Morgan Co Hwy, Sunbright, TN 37872

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

9. This filing will be effective on **Wednesday, September 4, 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 **General Counsel:**
Joshua A. Mars

I, **Mary Fink**, consent to sign for **Capital Corporate Services, Inc.** who serves as the Registered Agent on behalf of this entity on Wednesday, September 4, 2024.