

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
KY Secretary of State
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Michael G. Adams
Secretary of State
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Frankfort, KY 40602-0718
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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 business entity is a **limited liability company**.
2. The name of the entity is: **ITERUM LIFE COACHING LLC**
3. The name of the entity to be used in Kentucky is (if applicable): **N/A**
4. The state or country whose law the entity is organized is **Colorado**.
5. The date of organization is **9/26/2022** and the period of duration is **perpetual**.
6. This entity is managed by Members

7. Principal Office

1851 Timber Creek Dr
Lexington, KY 40509

8. Required Representatives

Member	Kyla Reske	1851 Timber Creek Lexington Dr	KY	40509
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9. Registered Agent/Office

Iterum Life Coaching LLC
1851 Timber Creek Dr
Lexington, KY 40509

I, **Kyla Reske**, consent to sign for **Iterum Life Coaching LLC** who serves as the **Registered Agent** on behalf of this Entity.
on Monday, August 28, 2023

As the Authorized Representative, I, **Kyla Reske**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Owner**