

**Commonwealth of Kentucky**  
**Michael G. Adams, Secretary of State**

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Michael G. Adams  
KY Secretary of State

Received and Filed

1/29/2023 12:00:00 AM

Fee receipt: \$324.00

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**

**RCA**

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 profit corporation.
2. The name of the entity is: BLUE SPRIG PEDIATRICS, INC.
3. The name of the entity to be used in Kentucky is (if applicable):
4. It is an entity organized and existing under the laws of the state of Delaware.
5. The date of organization is See Original Certificate of Authority. and the period of duration is perpetual

**Principal Office**

7500 SAN FELIPE  
SUITE 990  
HOUSTON, TX 77063

**Registered Agent Name/Address**

C T CORPORATION SYSTEM  
306 W. MAIN STREET  
SUITE 512  
FRANKFORT, KY 40601

**Current Officers**

CEO	Jason Owen	7500 San Felipe St., Suite 990, Houston, Texas 77063
CFO	Lance Carlson	7500 San Felipe St., Suite 990, Houston, TX 77063
COO	Sharyn Kerr	7500 San Felipe St., Suite 990, Houston, TX 77063

6. As the Authorized Representative, I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Lance Carlson on 1/29/2023

7. As the Registered Agent, I declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. C T CORPORATION SYSTEM on 1/29/2023