

Commonwealth of Kentucky
Michael G. Adams, Secretary of State

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Michael G. Adams
Kentucky Secretary of State
Received and Filed:
4/16/2025 12:50 PM
Fee Receipt: \$90.00

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

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 entity is a **limited liability company**.

2. The name of the entity is

Secure Insurance Group II, LLC

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

SECURE INSURANCE GROUP II LLC

4. The state or country under whose law the entity is organized is **Missouri**.

5. The date of organization is **7/22/2022** and the period of duration is **perpetual**.

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

3253 E Chestnut Expressway Suite 320, Springfield, MO 65802

7. The name of the initial registered agent is

URS Agents

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

306 West Main Street, Suite 512, Frankfort, KY 40601

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

Manager	Brian Askins	3253 E Chestnut Expressway, Springfield, MO 65802
Organizer	Brian Askins	3253 E Chestnut Expressway, Springfield, MO 65802
Member	Jessica Moore	3253 E Chestnut Expressway, Springfield, MO 65802
Member	Jami Grey	3253 E Chestnut Expressway, Springfield, MO 65802

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

10. This filing will be effective on **Wednesday, April 16, 2025**.

Kentucky that the foregoing is true and correct
Signature of individual signing on behalf of **D
Grey**

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I, **URS Agents**, consent to sign for **URS Agents** who serve as
the Registered Agent on behalf of this entity on Wednesday, April
16, 2025.

