

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
P. O. Box 718
Frankfort, KY 40602-0718
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<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 business entity is a **profit corporation**.
2. The name of the entity is: **INVO PEO, INC. I**
3. The name of the entity to be used in Kentucky is (if applicable): **INVO PEO, I INC.**
4. The state or country whose law the entity is organized is **Tennessee**.
5. The date of organization is **9/18/2009** and the period of duration is **perpetual**.

6. Principal Office

800 Oak Ridge Tpke Ste A500
Oak Ridge, TN 37830

7. Required Representatives

Officer	William M Arowood	800 Oak Ridge Tpke., Ste. A500	Oak Ridge	TN	37830
Secretary	Robert J Arowood	800 Oak Ridge Tpke., Ste. A1000	Oak Ridge	TN	37830
Director	William M Arowood	800 Oak Ridge Tpke., Ste. A500	Oak Ridge	TN	37830

8. Registered Agent/Office

Corporation Service Company
421 West Main Street
Frankfort, KY 40601

I, **Aindrea Mancari**, consent to sign for **Corporation Service Company** who serves as the **Registered Agent** on behalf of this Entity.
on Tuesday, January 9, 2024

As the Authorized Representative, I, **William M Arowood**, declare under penalty of perjury under the laws of the state of Kentucky that the foregoing is true and correct. Title: **Director**